## L17000134186

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## **COVER LETTER**

TO:		tion Secti of Corpo				
eun ir			Marketing LLC			
SUBJE	CI:		Name of Limit	ted Liability Company		<del></del>
The enc	losed Arti	cles of An	nendment and fee(s) are subn	nitted for filing.		
Please r	eturn all c	orrespond	ence concerning this matter to	o the following:		
			George Archer			
			Archer Digital Marketing L	Name of Person LC	-	
			2200 WINTER SPRINGS F	Firm/Company BLVD.		
			#106-221 Oviedo FL 32765	Address		
			garcher777@earthlink.net	City/State and Zip Code		
			E-mail address: (to	be used for future annual rep	ort notification)	<del></del>
For furti	ner inform	ation con	erning this matter, please cal	II:		
George				407 41678 at ()		
	;	Name of Pe	erson	Area Code	Daytime Telephone N	umber
Enclosed	d is a chec	k for the f	following amount:			
<b>≘ \$</b> 25.	00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Cer d) Cer	.00 Filing Fee, rtificate of Status & rtified Copy fitional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**5**...

Archer Digital Marketing LLC			CLLAH CORE	-i
(Name of the Limited	Liability Comp	pany as it now appears on our records.) I Liability Company)	1 29 ASS	F
The Articles of Organization for this Limited Lia Florida document number L17000134186	bility Compan		9 AM 9: 57 SUESTANDIANE	ED
This amendment is submitted to amend the follow	ving:		; <b>-</b>	
A. If amending name, enter the new name of t	he limited lia	bility company here:		
Mile One Media LLC				
The new name must be distinguishable and contain the wor	ds "Limited Lial	bility Company," the designation "LLC" or the abb	oreviation "L.L.C."	_
Enter new principal offices address, if applical	ole:	n/a		
(Principal office address MUST BE A STREET				_
The par office mareas (1091 DE 1101 MEET	<u> </u>			_
				_
Enter new mailing address, if applicable:		n/a		
(Mailing address MAY BE A POST OFFICE B	() <b>Y</b> )			_
manng undress MAT DE ATOST OFFICE D	<u> </u>			_
				-
B. If amending the registered agent and/or registered agent and/or the new registered offi			he name of the	<u>new</u>
Name of New Registered Agent:	n/a			_
New Registered Office Address:				
New Registered Office Address.		Enter Florida street address		_
		Planida		
		Florida	Zin Code	_

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> Address **Type of Action** \_□ Add \_□ Remove □ Change \_□ Add \_□ Remove \_□ Change \_ 🗆 Add \_□ Remove \_ Change \_□ Add \_□ Remove ☐ Change □ Add □ Remove □ Change

□ Add

☐ Remove

☐ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  n/a
(If an ef Note:	tive date, if other than the date of filing:  [Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	10/25 2018
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee