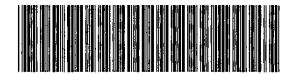
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COVER LETTER

	ation Sec n of Corp		,	!			
	ATINUM	ENTERPRISES 34 LLC					
SUBJECT:		Name of Lim	ited Liability Con	ipany			
		mendment and fee(s) are sub-	_				
ricase retturi ari	correspon	CAMILO SALTOS	to the following	•			
		_	Name of P	erson			_ _ _ _
		PLATINUM ENTERPRIS	ES 34 LLC				
		-	Firm/Com	pany	-	·· -	
		3000 NW 13TH TER, Apt	403				
			Addres	s		· · · · · · · · · · · · · · · · · · ·	
		SUNRISE, FL 33323					ANSE VENEZATION
			City/State and	Zip C	ode		A II: 2
		CAMIKA0113@GMAIL.C					53 =
For further infor	mation co	ncerning this matter, please ca	to be used for futuall:	ire an	пиат герогі попп	cation)	20
CAMILO SALT	os		561 at (962-5056		
	Name of	Person	Area (Code	Daytime	Telephone 1	Number
Enclosed is a cho	eck for the	following amount:					
■ \$25.00 Filing	g Fce	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Fi Certified (additional	Cop		Co Co	0.00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclosed)
	Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations c 6327 see, FL 32314		Regi Divi: Clift 2661	EET/COURIE stration Section sion of Corpora on Building Executive Cen shassee, FL 323	tions	ESS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLATINUM ENTERPRISES 34 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/17/2017 and assigned Florida document number L17000152546 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: KCW MEDIA LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Florida

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
MGR	KAREN FAJARDO SALAMANCA	3000 NW 13TH TER, Apt 403	■ Add
		SUNRISE, FL 33323	☐ Remove
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			Add
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fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prote: If the date inserted in this block does not meet the app	rior to date o	of filing or m	ore t <mark>han</mark> 90 da	(optional) ys after filing.) ts, this date v	Pursuant vill not b	to 605.020 be listed a
ocument's effective date on the Department of State's record	rds.	·				
record specifies a delayed effective date, but i The 90th day after the record is filed.	not an e	ffective t	ime, at 12	:01 a.m. d	on the	earlier
ted APRIL 10 , 2018	·					
Signature of a member or au						

Page 3 of 3

Filing Fee: \$25.00