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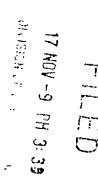
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER *

| R Media L | | | |
|---------------------------|--|---|--|
| SUBJECT: | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Edgar Flores | | |
| | | Name of Person | |
| | RMedia LLC | | |
| | | Firm/Company | |
| | 1447 N Krome Avenue | | |
| | | Address | |
| | Homestead, FL 33030 | | |
| | | City/State and Zip Code | |
| | edgar.flores@miprestadito.u | tom to be used for future annual report notif | |
| for further information (| concerning this matter, please co | • | icairen) |
| Edgar Flores | | 574 3868817 | |
| Name (| of Person | at () Area Code Daytime | Telephone Number |
| Enclosed is a check for t | the following amount: | | |
| □ \$25.00 Filing Fec | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclose |

MAILING ADDRESS:

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

| R Media LLC | | |
|---|---|-----------------------|
| (Name of the Limited Liability Compa (A Florida Limited | ny as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Company Florida document number L17000177254 | were filed on August 18, 2017 | and assigned |
| This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab RMedia LLC The new name must be distinguishable and contain the words "Limited Liabi | | |
| . If amending name, enter the new name of the limited liab | ility company here: | |
| RMedia LLC | | - ' b ' |
| he new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the | abbreviation "L.L.C." |
| inter new principal offices address, if applicable: | 2742 SW 8th Street STE 21 | ببَ |
| Principal office address MUST BE A STREET ADDRESS) | Miami, FL 33135 | ور) طل |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| 3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here | | er the name of the n |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | - |
| | | |
| | , Florida | Zin Coyle |

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 |
|--------------|-------------|-------------|----------------|
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| fec. | tive date if other than the date of filing: |
| ote: | tive date, if other than the date of filing: |
| | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the earlier of the carrier of the record is filed. |
| | November 03 2017 |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00