17000258283

(Requestor's Name)	<u> </u>
(Address)	
(Address)	
(City/State/Zip/Phone #	()
	MAIL
(Business Entity Name)
(Document Number)	
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C. GOLDEN SEP - 3 2019

COVER LETTER

TO: Registration Section Division of Corporations

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bitiaton di Corporation.

CPS Media LLC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine Perrin-Stoceo

Name of Person

CPS Media LLC

Firm/Company

179 North Bay Shore Dr Ste 179-4

Address

Miami Beach FL 33141

City/State and Zip Code

Christine.perrin-stocco@n2pub.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Christine Perrin-Stoeco
 305
 495-6420

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)

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

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	FAMENDMENT		
	TO ORGANIZATION	1189 A.A.	Ĵ,
	OF	-, ·	50
		2019 AUG 21	PM 3.02
CPS Media LLC	many as it now appears on our records)		01 0- 00
(A Florida Limite	i <mark>pany as it now appears on our records.</mark>) ed Liability Company)		
The Articles of Organization for this Limited Liability Compar	ny were filed on December 19, 2017	and assigned	
Florida document number <u>L17000258283</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liz	ability company here:		
	ability company acre.		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the a	obreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE BOX)</u>			
			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		the name of the	new
registered agent and/or the new registered once address in	ere.		
Name of New Registered Agent:			
New Registered Office Address:			
<u>new Registered Office Address</u> .	Enter Florida street address		
	Floricta		
	City	Zip 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	Mario Stocco	179 North Bay Shore Dr	
			🖬 Add
			Remove
		Miami Beach FL 33141	Change
		····	🗆 Add
			Remove
			Change
			Add
			Remove
			Change
			🖸 Add
			Remove
			Change
			🛛 Add
			Remove
			Change
	<u> </u>		🗌 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 12 2019

Signature of a member or authorized representative of a member

Christine Perrin-Stocco

Typed or printed name of signce