4/19/22, 3:27 PM

Division of Corporations

Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

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MANKS MEDIA, LLC

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COVER LETTER

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| | Legalzoom.com, Inc. | | | | | | | | |
| | Firm/Company | | | | | | | | |
| 101 N Brand Blvd 11th Fl Address Glendale, CA 91203 | | | | | | | | | |
| | | | | | | | | City/State and Zip Code | |
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| ing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ■ \$55.00 Filing Fee & Certified Copy (additional copy is enciosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed) | | | | | | |
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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

LegalZoom.com, Inc.

| MANKS MEDIA, LLC | | |
|---|--|------------------------------|
| (Name of the Limited Limbility Comp (A Florida Limited | any as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Company Florida document number 1.18000008910 | y were filed on 01/10/2018 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lial | bility company here: | |
| The new name must be distinguishable and contain the words "Limited Liab | sility Company," the designation "LEC" of | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 6586 West Atlantic Avenue #201 | 9, Delmy Beach, FL 33473 |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 6586 West Atlantic Avenue #201 | 9, Defray Beach, FL 33473 |
| B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he | office address on our records, | enter the Dame of the |
| Name of New Registered Agent: | | FILEI III/ STEE |
| New Registered Office Address: | Enter Florido street address | PH 3: 2 |
| | Flor | ida 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

LegalZoom.com, Inc.

MGR = Manager AMBR = Authorized Member

Page: 5 of 6

| <u>Title</u> | Name | <u>Address</u> | Type of Action |
|--------------|------------|--|----------------|
| AMBR | POHL, LISA | | |
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| Note: | ive date, if other than the date of filing: (optional) ective 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 ent's effective date on the Department of State's records. |
| The | ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed. |
| Dated | April 7 2022 Pall |
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Typed or printed name of signee