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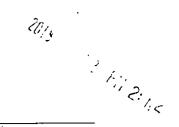
TO:	Registration Se Division of Cor			
SUBJ	The Babylo	n Bee, LLC		
SOL		Name of Limi	ted Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Paul J. Burkhart, Esq.		
			Name of Person	
		Law Offices of Paul J. Burl	khart, PL	
			Firm/Company	
		800 Village Square Crossin	ug	
			Address	
		Palm Beach Gardens, FL 3	3410	
			City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notifi	eation)
For fu	rther information c	oncerning this matter, please co	ill:	
Paul F	Burkhart		561 880-0155	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
≅ \$2	5,00 Filing Fee	□ \$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 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Babylon Bee, 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 04/26/2018 and assigned
Florida document number L18000105913	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	110 Front Street, Suite 300
(Principal office address MUST BE A STREET ADDRESS)	Jupiter, FL 33477
Erter new mailing address, if applicable:	110 Front Street, Suite 300
(Mailing address MAY BE A POST OFFICE BOX)	Jupiter, FL 33477
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Planta
	Florida City Zip Code
No. Designated Asset Standard of Shanging Davistand Aponts	

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_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Seth Dillon	110 Front Street, Suite 300	□ Add
		Jupiter, FL 33477	Remove
			D Add
			Remove
			Change
			□ Remove
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ffective date, if other than the an effective date is listed, the date mu ote: If the date inserted in this bocument's effective date on the E	st be specific and cannot ock does not meet t	he applicable stat	tiling or more than utory filing requir	(optional) 20 days after filing.) Pur ements, this date will	suant to 605,020 not be listed as
e record specifies a delaye The 90th day after the rec		but not an el	fective time, a	t 12:01 a.m. on	the earlier o
September 6	20	19			
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Page 3 of 3

Filing Fee: \$25.00