118000244102

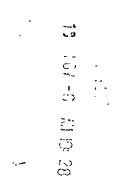
	uestor's Name)	
(Net	(uestoi s Name)	
(Adr	dress)	
ų ide		
(Add	iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doo	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	•
		3

Office Use Only



300320364413

11/06/18--01015--026 **25.05



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TV 4 E Endersises 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:
Eric Cunningham Name of Person
TV DE ENTERPRISCS
3416 NW 14th Coust
Fort Landerdale FL 33311 City/State and Zip Code
i. e en let prises 98 a Gmilicom E-mail addless: (to be used for future annual report notification)
For further information concerning this matter, please call:
Eric Carning lam at (585) 4/4/267 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S \$25.00 Filing Fee

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

IVAE Ent	echu, saz	
(<u>Name of the Limited Liabi</u> (A Flori	ECPO'S CS lity Company as it now appears on o da Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	-17-12 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		`,
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida sti	voet address
<u></u>		Florida
	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, enter the title, name, and address of each person being added or removed from our records:

or removed from our records.		
MGR = Manager AMBR = Authorized Member		

<u>Title</u>	Name	Address	Type of Action
Amb	Eric Lunningham	11680 Kerry dr	⊠ Add
		11680 Kerry dr Hallywood, FL 33026	☐ Remove
			Change
			Remove
			Change
		Remove	
			☐ Change
		100 to	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			Change
		300	□ Aḋd
		Remove	
			Change
		,	Remove
			□ Change

Effective date, if other than the date of filing: \(\subseteq -\subseteq 2 -\subseteq 2 \) (optional) fan effective 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 60: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list locument's effective date on the Department of State's records.	
Iffective date, if other than the date of filing: \\ \D = \Q \[\] \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \begin{align*} -\lambda & \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \begin{align*} -\lambda & \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \frac{1}{2} \\ \lambda \text{[optional]} \\ \text{ion effective 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 \\ \text{iote:} If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ocument's effective date on the Department of State's records.	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \frac{1}{2} \\ \lambda \text{[optional]} \\ \text{ion effective 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 \\ \text{iote:} If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ocument's effective date on the Department of State's records.	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \begin{align*} -\lambda & \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \frac{1}{2} \\ \lambda \text{[optional]} \\ \text{ion effective 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 \\ \text{iote:} If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ocument's effective date on the Department of State's records.	
ffective date, if other than the date of filing: \\ \sum_ = \lambda \begin{align*} -\lambda & \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•
ffective date, if other than the date of filing: \\ \sum_ = \lambda \frac{1}{2} \\ \lambda \text{[optional]} \\ \text{ion effective 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 \\ \text{iote:} If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ocument's effective date on the Department of State's records.	
ffective date, if other than the date of filing: \(\sum_2 \frac{1}{2} \) \(\sum_2 \frac{1}{2} \) \(\text{(optional)} \) an effective 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 \(\text{iote:} \) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	\
an effective 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 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	
an effective 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 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	
an effective 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 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	 %
an effective 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 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	Ø.
an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	
an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occument's effective date on the Department of State's records.	
an effective 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 interprises of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list locument's effective date on the Department of State's records.	
an effective 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 soles. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list locument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli-	filing.) Pursuant to 605.020
The 90th day after the record is filed.	a.m. on the earlier
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00