## L190000 42545

(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:				
APR 2 4 2023				



08/09/23--01020--025 \*\*25.00

Office Use Only

S. ROBERTS

AUG 1 7 2023





July 19, 2023

RAIHAN MUSTAFA 10181 NW 4TH ST PLANTATION, FL 33324 US

SUBJECT: VISIONARY MEDIA, LLC

Ref. Number: L19000042545

We have received your document for VISIONARY MEDIA, LLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of twenty five dollars (\$25.00).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS Regulatory Specialist III

> RECEIVED AUG 0 4 2023

Letter Number: 823A00016097

## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

VISIONARY MEDIA, LLC SUBJECT:  Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Raihan Mustafa				
	· -	Name of Person			
	VISIONARY MEDIA, LL	С			
	•••	Firm/Company			
	10181 NW 4th St				
		Address			
	Plantation FL 33324				
		City/State and Zip Code	· · · · · ·		
	Rmustafa11@gmail.com				
	E-mail address: (	to be used for future annual report no	otification)		
For further information c	oncerning this matter, please co	all:			
Raihan Mustafa		at (454 ) GP7-	6965		
Name o	f Person		me Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>		
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

VISIONARY MEDIA, LLC

The Articles of Organization for this Limited Liability Company were filed on 02/12/2019 and assigned Florida document number  $\frac{1.19000042545}{1.190000042545}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: AMRM, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_, Florida \_ City 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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			□Remove
		-	□Change
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(If an ef Note:	ive date, if other than the date of filing:
he recor	d 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 led.
Dated	7/3/2023 7/31 . 2023.
	4.2
	Signature of a member or authorized representative of a member
	Raihan MUSLAFA
	Raihan Mustafa Typed or printed name of signee

ET COS OF