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2019 pro 27 PH 5: 59

C. GOLDEN

JAN 2 9 2020

## **COVER LETTER**

TO: Registration S Division of Co			
Caliber M	edia LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Gabriel Dias		
		Name of Person	
	Caliber Media LLC		
		Firm/Company	
	378 Northlake Blvd #119		
		Address	
	North Palm Beach, FL 33-	408	
	gabedias012@gmail.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifi	ication)
For further information (	concerning this matter, please c	all:	
Gabriel Dias		561 860-0818 at ()	
Name (	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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 Adden		Stroot Addrage	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Caliber Media LLC

2019 PEC 27 PM 5: 59

(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 May 1, 2019 \_\_\_\_ and assigned Florida document number L19000118482 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." 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:

## 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.

City

Enter Florida street address

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
AMBR	Grace Dias	378 Northlake Blvd #119	
		North Palm Beach, FL 33408	■Remove
			□ Change
AMBR	Gabriel Dias	378 Northlake Blvd #119	<b>≣</b> Add
		North Palm Beach, Fl 33408	□Remove
			☐ Change
			□Add
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ective date, if other than the date must be reffective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	ite of filing:	plicable statutory f	or more than 90 days af	tional) fer filing.) Pursuant to 605 his date will not be liste	5.0207 ed as
ecord specifies a delayed effective d s filed.	ate, but not an effectiv	ve time, at 12:01 a.	m, on the earlier of:	(b) The 90th day after	r the
December 3	2019				
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Drave Si	Dividenda includer or a				