## L19000120689

(Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	<del>;</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

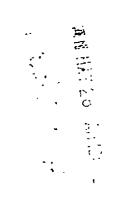


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RECEIVED

MAY 28 2019





## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Divi	ision of Co	rporations			water for a
CHRIDAT	Weston Me	edia Company, LLC			. 12 K
SUBJECT:			ited Liability Company		The Marie Control
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Jiju Jacob			
			Name of Person		<del></del>
		Weston Media Company, I	LLC		
			Name of Limited Liability Company  Indirect Liability Comp		
	Weston Media Company, LLC    Name of Limited Liability Company				
		<del></del>	Address		
		Davie, Florida 33331			
		jay@westonmedia.co	City/State and Zip Code		
				port notification)	_
For further in	formation c	concerning this matter, please ca	all:		
Jay Jacob			- · · ·	5458	
	Name o	f Person		Daytime Telephone Numb	per
Enclosed is a	check for the	he following amount:			
■ \$25.00 Fi	iling Fee		Certified Copy	Certifi (ed) Certifi	cate of Status & ed Copy
	Registr Divisio	ration Section on of Corporations	Registration Division of	n Section Corporations	

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 2 4 26 7 25 21 72

Weston Media, LLC				END HALLO BOLLS
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appea Liability Company)	ars on our records.	
The Articles of Organization for this Limited	Liability Company	were filed on _	05-03-19	and assigned
Florida document number L19000120689				
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	ility company h	<u>iere</u> :	
Weston Media Company, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the	designation "LLC" (	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	No Change		
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> E BOX)</u>	No Change		
B. If amending the registered agent and registered agent and/or the new registered of			n our records,	enter the name of the r
Name of New Registered Agent:	- To Change			
New Registered Office Address:	No Change	r . ru		
		Enter 1 to	orida street address	
			, Flor	ida
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register	ed agent and agre	ee to act in this	capacity. I furth	her agree to comply with

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
			Add
			Remove
			Change
			Add
			□ Remove
			□ Change
			Remove
			Change
			□ Remove
			Change
			🗖 Add
			☐ Remove
			☐ Change
	<del></del>		🗖 Add
		<del></del>	C Remove
			Change

Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specifie and cannot be prior to date of filing or more shan 90 days after filing.) Pursuant to 605.0207 Nute; If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.  Dated  May 24  2019  Signature of a member or authorized representative of a member  Jiju Jacob			
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•			
Jiju <b>J</b> acob		Signature of a member or authorized representative of a member	
	Jiju Jacob		

Page 3 of 3

Filing Fee: \$25.00