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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
CUBICCE	David and	Goliath Publishing Firm, LLC.		
SUBJECT:		Name of Lim	nited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Joseph A. Camerieri		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		David and Goliath Publish	ing Firm, LLC.	
			Firm/Company	
		1643 Brandywine Way		
			Address	
		Dunedin, Florida 34698		
		1 11 11 11 11 11 11 11 11 11 11 11 11 1	City/State and Zip Code	
		davidandgoliathfirm@gmai E-mail address: (Leom to be used for future annual report	notification)
For further in	iformation c	oncerning this matter, please c	·	
Joseph A. Ca	ımerieri		727 741-3759 at ()	
	Name o	f Person		time Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)
Reg Div		Section orporations	Street Address Registration Division of C	Section Corporations
). Box 632 lahassee, I			f Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

David and Goliath Publishing Firm, LLC.		
(<u>Name of the Limited Liability Comp</u> o (A Florida Limited	nny as it now appears on our reco Liability Company)	rds.)
he Articles of Organization for this Limited Liability Company	were filed on November 25, 2	and assigned
lorida document number L19000291132		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	oility company here:	
David and Goliath Media Publishing Firm, LLC.		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		72
nter new mailing address, if applicable:	N/A	12. The 12. Th
Mailing address MAY BE A POST OFFICE BOX)		
		:5
		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	P. Dietari	
	Enter Florida street addr	<i>ess</i>
		lorida
	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

MGR = Manager AMBR = Authorized Member **Title** Name <u>Address</u> **Type of Action** _____ □Add ____ □Add _____ □Remove _____ □Change □Remove Change <u></u>□Remove _____ □Add _____ Change _____ □Remove

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

NA							
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tive date, if other than the date of filing:				(optio	D		
fective date is listed, the date must be specific and cannot be p	prior to date o	of filing or m	ore than 90	days after f	iling.) P	บรินณาเ	to 605.0
If the date inserted in this block does not meet the ap nent's effective date on the Department of State's reco		tutory filin	g requirem	ents, this	date wi	II not t	e liste
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rd specifies a delayed effective date, but not an effective	ve time, at 1	12:01 a.m.	on the earl	ier of: (b)	The G	Oth da	v after
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Signature of a member or a	authorized re	presentative	of a member	ST.			