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| (Requestor's Name) | |
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| PICK-UP WAIT | MAIL |
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| (Business Entity Name) | |
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| Certified Copies Certificates of Sta | tus |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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FEB 2 9 2020 S. YOUNG

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

| | edia Group, L L C | | |
|---|--|---|--|
| SUBJECT: | Name of Lin | nited 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: | |
| | Marion J Ogline | | |
| | | Name of Person | |
| | YOLO Media Group, LLC | 2 | |
| | | Firm/Company | |
| | 4518 Lady Hawk Way | | |
| | | Address | |
| | Melbourne, FL 32904 | | |
| | | City/State and Zip Code | |
| | yolomediagroup1@gmail.c | | |
| | E-mail address: (| to be used for future annual report notifi | cation) |
| For further information of | concerning this matter, please c | all: | |
| Marion J Ogline | | 321 5780875 at () | |
| Name o | 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) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres | | Street Address: | ion |
| Registration Section Division of Corporations | | Registration Section Division of Corporations | |
| P.O. Box 6327 | | The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOLO Media Group, LLC

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

| (////////////////////////////////////// | or Blacking Company, | TIC. A |
|--|---|-----------------------------|
| The Articles of Organization for this Limited Liability Comparison document number $\frac{L20000008676}{L20000008676}$. | ny were filed on January 2, 2020 | ass uned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited li</u> | ability company here: | |
| The new name must be distinguishable and contain the words "Limited Lie | ability Company," the designation "LLC" o | r 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 offic agent and/or the new registered office address here: | e address on our records, <u>enter th</u> | e name of the new register |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Flori | da |

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 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 JT Dylan Ogline | 4518 Lady Hawk Way | | |
| | | Melbourne, FL 32904 | |
| | | | □Change |
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| Effective date, if other than the date of filing: Out/02/2020 | | _ | | |
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| ignature of a member or authorized representative of a member | January 24 | 2020 | | |
| Marion J Ogline | My | Signature of a member or authoriz | red representative of a member | |
| | Marion J Ogline | ! | | |