Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Phone

Account Number : I20090000081

Fax Number

: (307)200-2803 : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNITED LATIN MEDIA LLC

	Certificate of Status	0
. <i>:</i>	Certified Copy	0
	Page Count	04
-	Estimated Charge	\$25.00

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Corporate Filing Menu

Help

K. SALY

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



UNITED LATIN MEDIA LLC

(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 Li	ability Company	were filed on 04/16	/20	and assigned
Florida document number L20000105300)			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designa	ntion "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applic		10754 NW 78		
(Principal office address MUST BE A STREE	T ADDRESS)	Doral, FL 331	78	
Enter new mailing address, if applicable:		10754 NW 78	Terrace	
(Mailing address MAY BE A POST OFFICE	Doral, FL 331	78		
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office : ss here:	address on our recore	ds, <u>enter the name</u>	of the new registered
Name of New Registered Agent: REGI		RED AGENTS	INC.	
New Registered Office Address:	7901 4th S	St N STE 300 Enter Florida st	reei address	
	St. Peters	burg ^{City}	, Florida <u>33</u>	702 Zip Code
Nam Dogistored Agent's Signature if changing	Registered Agent:			

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. Thereby 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>	Name	Address	Type of Action
MGR	DANIEL BARTRA	10754 NW 78 Terrace	🗆 Add
		Doral, FL 33178	⊠ Remove
			□Change
AMBR	DANIEL BARTRA	10754 NW 78 Terrace	∑ JAdd
		Doral, FL 33178	□Remove
			□Change
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			□Remove
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fective date, if other than in effective date is listed, the date ote: If the date inserted in the cument's effective date on the	is block does not me	et the applicable	ate of filing or more t statutory filing red	(optional han 90 days after filin quirements, this dat) g.) Pursuant to 605 0207 (e will not be listed as t
ecord specifies a delayed efforis filed.	ective date, but not a	n effective time.	at 12:01 a.m. on th	ne earlier of: (b) T	The 90th day after the
nted <u>03/15</u>		2022			
	1				

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