

800351598808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

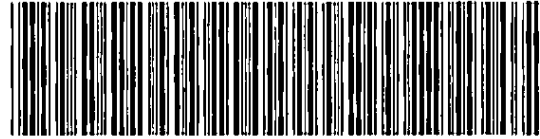
(Business Entity Name)

(Document Number)

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800351598808

09/08/20--01014--023 **25.00

2020 SEP -3 PM 12:51

OC

OCT 17 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RELATIVE MEDIA CONSULTANTS

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARYANN GRUCCIO

Name of Person

Firm/Company

9700 NW 3RD MANOR

Address

CORAL SPRINGS, FL 33071

City/State and Zip Code

mgruccio@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARYANN GRUCCIO

954 732-5009
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

2020 SEP -3 PM 12:51

RELATIVE MEDIA CONSULTANTS

(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 06/03/2020 and assigned
Florida document number L20000151692.

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9700 NW 3RD MANOR

(Principal office address MUST BE A STREET ADDRESS)

CORAL SPRINGS, FL 33071

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:

MARYANN GRUCCIO

New Registered Office Address:

9700 NW 3RD MANOR

Enter Florida street address

CORAL SPRINGS

Florida 33071

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

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>	<u>Address</u>	<u>Type of Action</u>
MRS	MARYANN GRUCCIO <i>OWNER</i>	9700 NW 3RD MANOR, CORAL SPRINGS FL 33071	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MS	KARIANNE HEHIR <i>Remove</i>		<input type="checkbox"/> Add
		5466 NW 85TH AVE, CORAL SPRINGS, FL 33067	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

THIS AMENDMENT IS ONLY TO CHANGE OWNERSHIP NOT THE LLC NAME ⁸²²³⁵ -8 11:12:51

REMOVE: KARIANNE HEHIR, 5466 NW 85TH AVE., CORAL SPRINGS, FL 33067

REPLACE: MARYANN GRUCCIO, 9700 NW 3RD MANOR, CORAL SPRINGS, FL 33071

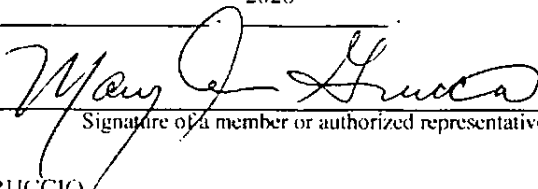
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 1 2020



Signature of a member or authorized representative of a member

MARYANN GRUCCIO

Typed or printed name of signee