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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Big Fancy i			
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Phil Christenot		
		Name of Person	
	Big Fancy Media Compan	y LLC	
		Firm/Company	
	4144 Tall Tree Drive		
		Address	<del></del>
	Orlando, FL 32810		
		City/State and Zip Code	
	phil@bigfancymediaco.con		
	E-mail address: (	to be used for future annual report not	ification)
For further information e	oncerning this matter, please c	all:	
Phil Christenot			
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres Registration 5		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Big Fancy Media LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our record Liability Company)	ds.)
The Articles of Organization for this Limited Liability Compan	y were filed on 11/02/2020	and assigned
Florida document number L20000347753		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Big Fancy Media Company LLC		
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2020 VE
		- 7
Enter new mailing address, if applicable:		<u>ं ज्</u> राम
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
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B. If amending the registered agent and/or registered office	address on our records, <u>enter</u>	the name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street addres	ss
	FI	orida
	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 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
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ffective date, if other than the data an effective date is listed, the date must be lote: If the date inserted in this bloc ocument's effective date on the Dep.	se specific and cannot be price k does not meet the apple	icable statutory filing	(optional) re than 90 days after filing.) requirements, this date v	Pursuant to 605.0207 ( vill not be listed as t
record specifies a delayed effective of list filed.	date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b) The	90th day after the
November 19	2020	<del></del> .		
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Si	ignature of a member or aut	horized representative of	of a member	<del></del>