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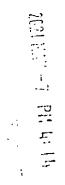
(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	·)
(Dc	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

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## COVER LETTER

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SUBJECT	l; <u></u>		ited Liability Company	-
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	ırn all correspo	ondence concerning this matter	to the following:	
		Nicholas J Strasser		
			Name of Person	
		STRASSMEDIA LLC		
			Firm/Company	
		7723 Pointview Circle		
			Address	<del></del>
		Orlando, FL 32836		
			City/State and Zip Code	<del></del>
		nstrassmedia@gmail.com		
		E-mail address: (	to be used for future annual report no	tification)
For furthe	r information c	oncerning this matter, please c	all:	
Nicholas .	J Strasser		407 4433425 at ( )	
	Name o	f Person	Area Code Daytii	ne Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.0	0 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:	oction
	Registration : Division of C		Registration S Division of Co	
	P.O. Box 632	-	The Centre of	•
•	Fallahassee,	FL 32314	2415 N. Monr	oe Street. Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRASSMEDIA LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number $\frac{L21000152269}{L21000152269}$	Company were filed on APRIL 1, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		. <u>्रि</u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, enter the na	nme of the new register
		至当
Name of New Registered Agent:		
New Registered Office Address:		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
	Enter Florida street address	
	Florida	
	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
MGR	Nicholas J Strasser	7723 Pointview Circle Orlando, FL 32836	□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
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		<del></del>	🗆 Add
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ective date, if other than the effective date is listed, the date made: If the date inserted in this buttent's effective date on the I	lock does not me	et the applicable	date of filing or more statutory filing	(optio e than 90 days after 1 requirements, this	iling.) Pursuant to 605.0
cord specifies a delayed effecti s filed.	ve date, but not ar	n effective time	, at 12:01 a.m. on	the earlier of: (b)	The 90th day after t
ed May 4	<del></del> .	2021			
		E. Atta			
	116	- All	ed representative of	C	