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,	(Requestor's Name)
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prop.J.	., MAIT MAIL
	(Business Entity Name)
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Certified Coples	Certificates of Status
Special instruction	s to Filing Officer:

Office Use Only



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MAY 24 2021 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 823946 4311859

AUTHORIZATION :

COST LIMIT : '\$ 25.00

ORDER DATE: May 20, 2021

ORDER TIME : 9:52 AM

ORDER NO. : 823946-010

CUSTOMER NO: 4311859

DOMESTIC AMENDMENT FILING

NAME: JVC MERGECO, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

<u>u</u>

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVC MERGECO, 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 Liability Company were filed on $\frac{05/11/2021}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JVC MEDIA OF FLORIDA, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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 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: New Registered Office Address: Enter Florida street address Florida ____ City

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>	Address	Type of Action
			□Add
			□Remove
			Change
<u>.</u>			□Add
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Tective date, if other than the neffective date is listed, the date muster. If the date inserted in this becument's effective date on the E	st be specific and cannot be ock does not meet the a	pplicable statutory fi		g.) Pursuant to 605.0207
ecord specifies a delayed effectivistiled.	re date, but not an effect	ive time, at 12:01 a.n	n. on the earlier of: (b) T	he 90th day after the
05/20 	. 2021	<u> </u>		
/s/ John Caracciolo				
	Signature of a member or			

Filing Fee: \$25.00