Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: ALLSTATE CORPORATE SERVICES CORP Account Name

Account Number : I20040000031 : (800)906-9220 Phone

: (800)906-9880 Fax Number

**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 0214 YT VIDEO, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$30.00

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A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corp.	tion orations				
0214 YT Vic					
SUBJECT:		Liability Company			
	amendment and fee(s) are submindence concerning this matter to				
	STEVEN WEISS				
		Name of Person			
	ALLSTATE CORPORATE	SERVICES CORP.			
		Firm/Company			
	2215 HENDRICKSON STR	EET, SUITE 1			
		Address			
			<u>.:.</u>		
		City/State and Zip Code		21	SEC VISIV
	FILING@ACS123.COM	o be used for future annual report notificat	ion)		28 0 0
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For further information of	concerning this matter, please ca			PH	왕숙 [
NAOMI OSTOPOWIT	Z	800 906-9220 at ()	N. See	2: 06	STA ARO
Name	of Person	Area Code Daytime Te	Icphone Number	90	ARY OF STATE F CORPORATIONS
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	S30,00 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)		
<u>Mailing Addr</u> Registration	ess: Section	Street Address: Registration Section of Corporation	on orations		

Malling 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

0214 YT Video, LLC		
(Name of the Limited Liability Compan) (A Florida Limited Lia	v as it now appears on our reconstility Company)	orus.)
The Articles of Organization for this Limited Liability Company with the Company with the Limited Liability Company with the Liability Company with	vere filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
214 YT Video, LLC		100 110 120 1100
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		21 J
(Principal office address MUST BE A STREET ADDRESS)		U 2
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PH 2: 06
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	idress
		, 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 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
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			□Removo
			☐ Change
			□ Remove
			☐ Change
			□Remove
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other than the first office office of the date is listed, the date in Note: If the date inserted in this document's effective date on the	plack does us	it meet me	Thhurean	late of filing	g or more t	nan 90 day quiremen	(optiona s after fili s, this de	l) ng.) Pursuan te will not	t to 605.020 be listed a	07 (3) as the
e record specifies a delayed effect rd is filed.	ive date, but	not an effe	ctivo time	, at 12:01	a.m. on t	ne earlier	of: (b)	The 90th d	ay after th	e
JULY 29		2021		,						
Dated	5	11/4								
	- A A	NI.								

Filing Fee: \$25.00