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COYER LETTER

Favorable Living Media LLC SUBJECT: 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: Cornelius Matthews Name of Person Favorable Living Media LLC Firm/Company 6501 Arlington Expressway B105 Suite 5025 Address Jacksonville, FL 32211 City/State and Zip Code (1) Favorablelivingmedia@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cornelius Matthews Name of Person Enclosed is a check for the following amount: 🙀 \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address: Street Address:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

> 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

Favorable Living Media LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L21000332627	were filed on July 22, 2021	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	•	breviation "L.L.C."	
Enter new principal offices address, if applicable:	Favorable Living Media LLC		
(Principal office address MUST BE A STREET ADDRESS)	6501 Arlington Expressway B105 Suite 5025		
	Jacksonville, FL 32211		
Enter new mailing address, if applicable:	Favorable Living Media LLC	<u></u>	
Mailing address MAY BE A POST OFFICE BOX)	6501 Arlington Expressway B105 Suite 5025		
	Jacksonville, FL 32211		
		7.5	
B. If amending the registered agent and/or registered office:	address on our records, <u>enter the nam</u>	*	
gent and/or the new registered office address here:		= 7	
N. C.V. D. C.		20	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
•	. Florida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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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			□Change
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