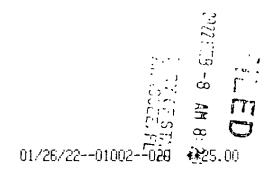
21000447784

	(Requestor's Name)	
 	(Address)	
	(Address)	
	(Address)	
	,	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Conjes	Certificates of Sta	ntus
Certified Copies	Certificates of Ste	
Special Instructions to	Filing Officer:	

Office Use Only



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Y SULKER FEB 0 \$ 2022



January 26, 2022

ALLYSON T MALL 3420 CASTLEBAR CIRCLE TALLAHASSEE, FL 32309

SUBJECT: ANCHOR MEDIA MANAGEMENT LLC

Ref. Number: L21000447784

We have received your document for ANCHOR MEDIA MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 322A00001994

Yasemin Y Sulker Regulatory Specialist III 122 FEB -8 PH 3: 04

www.sunbiz.org

COVER LETTER

TO:

	legistration Se Division of Cor				
SUBJEC	T: ANCH	JOR MEDIA MANAGEMENT L	LC		
		Name of Lim	ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please reti	urn all correspo	ndence concerning this matter	to the following:		
		ALLY!	ON T MALL		
			Name of Person		
		ANCHOR MEDIA	MMAGEMENT LLC Firm/Company		
		3420 CAST (06	AC CIRCLE Address		
		TALÉMASSEO FL			
			3 2 301 City/State and Zip Code		
For furthe	r information c	E-mail address: ()	GMAIL : COM to be used for future annual r all:	eport notification)	
	ALLYSON MAI		at (904)	\$899 - مرادا	
	Name o		Area Code	Daytime Telephone Number	
Enclosed	is a check for th	ne following amount:			
図 \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &	
Mailing Address:		Street Ad Registra	dress: tion Section		
Registration Section Division of Corporations		_	of Corporations		
P.O. Box 6327			tre of Tallahassee		
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UAGEMENT LLC		
ompany as it now appears on our reconited Liability Company)	rds.)	
pany were filed on 10/13/2021	and assigned	
liability company here:		
Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."	
<u> </u>		
	<u> </u>	
····		
	72:	
fice address on our records, <u>ente</u>	er the name of the new register	
	П	
Enter Florida street addi	ress	
_		
	Florida Zip Code	
	pany were filed on	

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
AMBR	ALLYSON T. MALL	3420 CASTLEBAR CIRCLE, TALLAHASSEE FL 32309	🗹 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□Add
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			□Remove
			Channa .

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated FEBRUARY 8 Signature of a member all authorized representative of a member ALLYSON MALL
Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)