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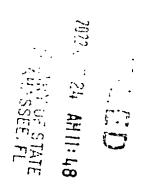
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

	CROSS PRINT CO, LLC					
SUBJECT:	Name of Limi	ted Liability Company				
The enclosed Articles o	f Amendment and fee(s) are subt	nitted for filing.				
Please return all corresp	condence concerning this matter (to the following:			22	
	Heidy De La Cruz				226	
		Name of Person			Po E	
	De La Cruz Media, LLC			SSET SSET	24 AM 11:48	
		Firm/Company		TA A	=	4
	100 E New York Ave Suite	e 103		H	20	
		Address		_		
	DeLand, FL 32724			_		
		City/State and Zip Code				
	HReynoso213@gmail.com		N-N-N-N			
	E-mail address: (to be used for future annual report noti	neauon)			
For further information	concerning this matter, please ca	all:				
Heidy De La Cruz		269 447-4541 at ()		_		
Name	e of Person	Area Code Daytim	e Telephone Numb	er er		
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	Filing Fee, cate of Statu ed Copy al copy is encl		
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations Fallahassee	810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Lia</u> (A Flo	ibility Compa orida Limited I	ny as it now appears on our records.) hiability Company)			
The Articles of Organization for this Limited Liability Clorida document number 1.22000088293	y Company	were filed on February 09, 2022		_ and as	ssigned
his amendment is submitted to amend the following	;·				
. If amending name, enter the new name of the l	limited liab	ility company here:			
De La Cruz Media, LLC			<u> </u>		
he new name must be distinguishable and contain the words "	Limited Liabil	ity Company," the designation "LLC" or	the abbre	viation ''l	L.C."
Enter new principal offices address, if applicable:		100 E New York Ave Suite 103	<u></u>	79%	
· · · · · · · · · · · · · · · · · · ·		Del and, FL 32724	<u>; -</u>	•••	
Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				7.5	
		1024 Wanderer Drive	SCH S	AMII	; ;
		Deltona, FL 32738	FL FIATE	+6	
s. If amending the registered agent and/or registon gent and/or the new registered office address her	ered office : <u>re</u> :	address on our records, enter the	e name o	of the no	ew regi
Name of New Registered Agent: He	Heidy De La Cruz				
New Registered Office Address: 10	0 E New Yor	rk Ave Suite 103			
		Enter Florida street address			
De	eLand	, Flori	da <u>3272</u> 4	l	
		City		Zip Code	2

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
MGR	Jonathan De La Cruz	1024 Wanderer Drive Deltona, FL 32738	
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			□Add □Remove □Remove
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	otional) fler filing.) Purs this date will i	uant to 6 not be li	05.0207 sted as
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of d is filed.	(b) The 90th	h day af	ier the
Dated OD 10/23 Signature of a member or authorized representative of a member			
No.			