## L23000043203

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



100409218831

05/31/23--01039--001 \*\*30.00

SECRETARY OF STATE ALLAHASSEE, FLORID



## **COVER LETTER**

	egistration Section Section of Corp						
SUBJECT		I MEDIA MGT LLC					
SOBJECT	•	Name of Limited Liability Company					
The enclose	ed Articles of i	Amendment and fec(s) are subm	itted for filing.				
Please retu	rn all correspor	ndence concerning this matter to	the following:				
		Linda MacDonald					
			Name of Person	<del></del>			
		FineBerri Media Mgt LLC					
Firm/Company							
1515 S central Ave							
		Address					
		Flagter Beach/FL 32136					
		City/State and Zip Code					
		lindamac920@gmail.com	1 10 0				
For further	information co	n-mail address: (to neerning this matter, please call	be used for future annual report	notification)			
Linda Mac		, , , , , , , , , , , , , , , , , , ,	561 9512211				
	Name of	Person	Area Code Da	ytime Telephone Number			
	a check for th	e following amount:  ☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			

Mailing 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

FINEBERRI MEDIA MGT LLC		
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (	Company were filed on 01/23/2023	and assigned
Florida document number L23000043203	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or the	abbrystation " (E.C."
Enter new principal offices address, if applicable:		E T
(Principal office address MUST BE A STREET ADD	RESS)	-55 3
Enter new mailing address, if applicable:		ST. OR
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the name	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	CIII	CHI CIMIC

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
<del></del>			□Add
			Петоve
			□Change
			□ A&d
		<del></del>	Remove
		<del></del>	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Patrick McKinney Owner 49	%	
·		
	****	
		SECRE LAH
		LAH
		V > (a)
		0310
		P
	<del></del>	
ective date, if other than the	date of filing:	(optional) iling or more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this blument's effective date on the D	ock does not meet the applicable statute	tory filing requirements, this date will not be listed
ament's effective date on the D	spartment of State's records.	
cord specifies a delayed effective	e date, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day after
filed.		or and an ine carrier on (b) The your day lines
May 23	2023	
ed May 23	, 2023	
	and Machin	$\sim 1d$
	Signature of a member or authorized repres	MACA TO THE PARTY OF THE PARTY

Filing Fee: \$25.00