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Y. SCOTT AUG - 5 2023

COVER LETTER

TO: Registration Section

Division of Cor	porations			
Jay Oster M	ledia Group, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
		(n. 16 . 60)		
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Jonathan Whiteman			
		Name of Person		
		Firm/Company		
	16743 Sunburst Lake St		<u>လ</u> ့ကျ	2023
		Address	= :A - ra	
	Wimauma, FL 33598			JUN 23
	jayoster.installs@outlook.co	City/State and Zip Code	:3C1 :3C1	JUN 23 PH 2: 0
	E-mail address: (to be used for future annual report no	ntification)	: 0 :
For further information e	oncerning this matter, please c	ail:		
Jonathan Whiteman		813 535-2482 at ()		
Nume o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for the	ic following amount:			
■ \$25.00 Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Cop (additional copy	Status &
Mailing Address: Registration Section		Street Address: Registration S	ection	
Division of Corporations		Division of Co		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jay Oster Media Group, LLC		
(Name of the Lin	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
he Articles of Organization for this Limited	Liability Company were filed on $\frac{03a}{1}$	/17/2025 and assigned
lorida document number L23000137128	<u></u> ,	
his amendment is submitted to amend the fo	llowing:	
i. If amending name, enter the new name	of the limited liability company he	<u>:re</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if appli	cable:	20Z
Principal office address MUST BE A STRE	ET ADDRESS)	
		77 72 72
	•	$\frac{1}{2}$ ω ω
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u> </u>	7: O
•	* \	
If any and in a share and a second a second and a second a		,
. If amending the registered agent and/or gent and/or the new registered office addr		ecords, enter the name of the new regis
•		•
Name of New Registered Agent:	Kevin Welfley	
New Registered Office Address:	56105 Coleus Ave	
· · · · · · · · · · · · · · · · · · ·	Enter Flor	ida street address
	Zephyrhills	, Florida ³³⁵⁴¹
•	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

it 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
			□Add
			□Remove
			Change
			□Add
			□ Remove
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ctive date, if other than the date of filing:	(optiona	I)	
effective date is listed, the date must be specific and cannot be prior to date of file. If the date inserted in this block does not meet the applicable statute	ing or more than 90 days after filir	ig.) Pursua	unt to 605.0: at he listed
iment's effective date on the Department of State's records.	ny ming requirements that de		
ord specifies a delayed effective date, but not an effective time, at 12:0 filed.	I a.m. on the earlier of: (b)	The 90th	day after t
d June 20	_		
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Filing Fec: \$25.00

Typed or printed name of signee