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COVER LETTER

TO: Registration Section Division of Corporations

PaidNBaze SUBJECT:	d Podcast LLC					
SOBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Vernard Jiggetts					
	Name of Person					
	Paid N Bazed					
Firm/Company						
	10135 Gate Parkway #908					
		Address	·····			
	Jacksonville, FL 32246					
		City/State and Zip Code				
	paidnbazed@gmail.com	to be used for future annual report notif	(Cation)			
For further information of	concerning this matter, please ca	-	ileanon,			
Vernard Jiggetts	904 9162443 at ()					
Name (of Person	Area Code Daytime	: Telephone Number			
Enclosed is a check for t	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 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

signed
L.C."
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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 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	Jiggetts, Vernard	10135 Gate Parkway #908	
		Jacksonville, FL 32246	□Remove
			■ Change
MGR	Rumph, Keith	7614 Arble Dr. Apt A	⊡Add
		Jacksonville, FL 32211	□Remove
			≡ Change
	Banks, Zhanellis	6407 Hughes St	□Add
		Jacksonville, F1. 32219	□Remove
			■ Change
			□Add
			□Remove
			Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Changing Titles for the members of the corporation. E. 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 after filing.) Pursuant to 605.0207 (3)(b) 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 _ 3/12 2024 mber or authorized representative of a member Vernard Jiggetts

Filing Fee: \$25.00

Typed or printed name of signee