12300045487

(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:
Regis

Office Use Only

2-24



800424900708

61 (1.28 -t.... +1. - ++1., 1.1



March 19, 2024

JAMES SCRIBNER 1100 PARK CENTRAL BLVD S POMPANO BEACH, FL 33064

SUBJECT: STACKS MEDIA, LLC Ref. Number: L23000454587

We have received your document for STACKS MEDIA, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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: 924A00005920

Morgan E Lovett Regulatory Specialist II

cover letter 3/28

Division of Cor	•		
SUBJECT: Stacks Med			
	Name of Lim	ited Liability Company	31104
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	- 7 .
Please return all correspo	indence concerning this matter	to the following:	
	James Scribner		
		Name of Person	
	Stacks Media		
		Firm/Company	
	1100 Park Central Blvd S		
		Address	
	Pompano Beach, FL 3306	4	
	.	City/State and Zip Code	
	JamesScribner3@gmail.com	n to be used for future annual report notif	Tonting)
For further information o	oncerning this matter, please c		icationy
James Scribner	oncerning this matter, picase c	240 751-3989	
	C.D.	at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	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
		0	

Mailing Address:

TO:

Registration Section

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

Stacks Media, LLC				
(Name of the Lim	ited Liability Con (A Florida Limit	npany as it now appears o ed Liability Company)	on our records.)	
The Articles of Organization for this Limited 1 Florida document number L23000454587	= = =	any were filed on 10/02	2/2023	and assigned
This amendment is submitted to amend the fol				
A. If amending name, <u>enter the new name o</u>	of the limited li	iability company hero	: :	
N/A				
The new name must be distinguishable and contain the	words "Limited Li	iability Company," the desi	gnation "LLC" or the abl	oreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE)	ET ADDRESS			
		\$1/ \$		
Inter new mailing address, if applicable:		N/A	·	
(Mailing address MAY BE A POST OFFICE	E BOX)	 .		
				.
B. If amending the registered agent and/or agent and/or the new registered office address.		ce address on our rec	ords, <u>enter the nam</u>	e of the new regis
Name of New Registered Agent:	N/A			:
New Registered Office Address:	N/A			-
		Enter Florid	a street address	
	N/A		, Florida	
		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 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>	<u>Address</u>	Type of Action
MGR	James Powers	1100 Park Central Blvd S.	= Add
		Pompano Beach, FL 33064	□Remove
			☐Change
MGR	Kevin Fernandes	3614 Village Blvd Apt 401	= Add
		West Palm Beach, FL 33407	□Remove
			□Change
			
			Remove
		.	DAdd .
			Remove .
			□Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change

N/A				
		· · · · · · · · · · · · · · · · · · ·		
				
		-		
	<u> </u>			
			·	
fective date, if other than the in effective date is listed, the date mi ote: If the date inserted in this becoment's effective date on the I	ist be specific and cannot be polock does not meet the ap	plicable statutory filir		ng.) Pursuant to 605.020
ecord specifies a delayed effecti is filed.	ve date, but not an effecti	ve time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after th
March 28th	2024			
	·			
	Signature of a member or	authorized representative	at a momber	
		admonized representativ	t of a member	

Filing Fee: \$25.00