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Division of Corporations

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Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone Fax Number : (305)328-4774

Finier the email address for this business entity to be used for future عمالات دات حسمت aduress for this dusiness entity to be used for fu annual report mailings. Enter only one email address please.** دانات

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Help

K. SALY

FEB 2 7 2025

To:

.....ARTICLES OF AMENDMENT. TO ARTICLES OF ORGANIZATION OF



SUMMIT LEAD MEDIA LLC

(Name of the Limite	A Florida Limited	iny as it now appear Liability Company)	's on our records.)					
The Articles of Organization for this Limited Liability Company were filed on 02/10/2025 and assigned Florida document number L25000070255								
This amendment is submitted to amend the follo	wing:							
A. If amending name, enter the new name of	the limited liab	ility company he	<u>·</u> · <u>re</u> :					
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the d	esignation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:		1878 DR. AND	RES WAY					
(Principal office address MUST BE A STREET		DELRAY BEA	CH, FL 33445					
Enter new mailing address, if applicable:		1878 DR. AND	RES WAY					
(Mailing address MAY BE A POST OFFICE B	<u>80X)</u>	DELRAY BEAG	CH, FL 33445					
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:			ecords, enter the name of the new registered					
New Registered Office Address:	1878 DR. AND							
			ida street address					
	DELRAY BEA	City City	. Florida 33445 Ziv Code					
		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 addlessiof each person being added
or removed from our records:	LED

MGR = N AMBR = A	Manager Authorized Member	Address Add		
<u>Title</u>	<u>Name</u>	Address	Type of Action	
AMBR	KYLE INGRAM	1878 DR. ANDRES WAY	<i>l n':</i> □Add	
		DELRAY BEACH, FL 33445	□Remove	
			🛱 Change	
AMBR	NICHOLAS SIGNORELLI	1878 DR. ANDRES WAY		
		DELRAY BEACH, FL 33445	□Remove	
AMBR	KYLE GRUPP	1878 DR. ANDRES WAY	□Add	
		DELRAY BEACH, FL 33445	□Remove	
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AMBR	SEAN LEDDICK	1878 DR. ANDRES WAY	🗆 Add	
		DELRAY BEACH, FL 33445	□Remove	
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			□Remove	

□Change

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From: Yanet Avila

Page: 5 of 5

To: