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## **CT CORP**

### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:	12/7/2017			wil D
		T. 120160000072	•	4.
Name:	GoodCo Radi	io, LLC		
Document #:				
Order #:	10742726			
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Thank you!

#### **COVER LETTER**

то:	Registration Sec Division of Corp			
2000	GoodCo Ra	die, L.L.C.		
SUBJEC	- l:	Name of Limi	ited Liability Company	······
The encl	osed Articles of	Amendment and fee(s) are subt	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter (	to the following:	
		Jon Turk		
			Name of Person	
		Cooley LLP		
			Firm/Company	
		1299 Pennsylvania Ave., N	SW, Suite 700	
			Address	
		Washington, DC 20005		
			City/State and Zip Code	
		dean@digity.me	to be used for future annual report notif	lication)
For furth	her information c	oncerning this matter, please ca		
Jon Tur	·k		202 776-2335	
····	Name o	f Person	at ()	e Telephone Number
Enclose	d is a check for th	ne 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 Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations on 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GoodCo Radio, L.L.C. (Name of the Limited 1)	Liability Company as it now appears on our records.) Florida Limited Liability Company)
	ility Company were filed on April 13, 1999 and assigned
Florida document number	·
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	e limited liability company here:
GoodCo Companies, LLC	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LLC" or the abbreviation "L.U.C."
Enter new principal offices address, if applicab	
(Principal office address MUST BE A STREET.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	22.0)
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new ce address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Floricia street address
	Florida Zw 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.

H Changing Registered Agent, Signature of New Registered Agent
Page 1 of 3

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>	Name	Address	Type of Action
			Remove
			Change
			☐ Remove
			Change
			🗆 Add
			Remove
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E. Effective date, if oth (If an effective date is line) Note: If the date inser document's effective definition of the record specifies b) The 90th day after the control of the record specifies by the specifies of the specifies by the specifies of the specifies of the specifies by the specifies of the specifie	date on the Departm	ctive date,	ecords.	, ,			
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