1-9900005313

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G. MCLEOD

MAR 1 0 2008

EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: Lexicon Media, L.L.C.			
	ited Liability Company)		
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondence concerning this matter	to the following:		
KENT RUNNELLS, F	P.A. (Name of Person)		
	(Name of Person)		
KENT RUNNELLS, P.A. (Firm/Company)			
101 Main Street, Suit	te A (Address)		
Safety Harbor, FL 3	,		
For further information concerning this matter, please c	all:		
KENT RUNNELLS (Name of Person)	at (<u>727</u>) 726-2728 (Area Code & Daytime 1	Celephone Number)	
Enclosed is a check for the following amount:			
\$\sumsymbol{\sumsymbol{\subset}}\$25.00 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	STREET/COURIER Registration Section	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lexicon Media, L.L.C.		
(<u>Name of the Limited L</u> (A F	liability Company as it now apper Florida Limited Liability Company	ars on our records.)
`	• • •	
The Articles of Organization for this Limited Lia	bility Company were filed on Of	3/25/1999 and assigned
Florida document number <u>L9900005313</u>	·	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company h	ere:
Briscoe Consulting, LLC		
The new name must be distinguishable and end with L.L.C."	the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation
B. If amending the registered agent and/or	registered office address on	our records, enter the name of the new
egistered agent and/or the new registered offi	ce address here:	
Name of New Registered Agent:	Kent B. Runnells, P.A.	
Nume of New Registered Agent.		
New Registered Office Address:	101 Main Street	
	(.	Enter Florida street address)
	Safety Harbor	, Florida <u>34695</u>
	(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 608, 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)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Address** Title Title <u>Name</u> Kenneth R. Skillman 619 Commiston Lane MGR Remove Lutz, Florida 335493867 Remove Remove □Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Raymond J. Briscoe Typed or printed name of signee

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Filing Fee: \$25.00