Office Use Only



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Y SULKER FEB 2 0 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 2/19/2020	**WALK IN**
ENTITY NAME CHAPTI	ERS MEDIA AND ADVERTISING LLC
DOCUMENT NUMBER_	
	PLEASE FILE THE ATTACHED AND RETURN
xxxxx	Plain Copy
	Certified Copy
	Certificate of Status
*1	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINAT	TION
NUMBER OF CERTIFICA	TES REQUESTED
TOTAL OWED \$ 25	ACCOUNT # 120160000072 4: C > W
Please call Tina at ti	he above number for any issues or concerns. Thank you so much!

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Enter new principal office address, if applicable:		
(<u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
2. The Florida document number of this limited liabil	lity company is: M20000001558	2020 FEB
Jurisdiction of its organization: Wyoming	<i>i</i> . —	
4. Date authorized to do business in Florida: 02/7/20		
SECTION II (5-9 complete only the applicable ch	anges)	0 () () () () () () () () () (
5. New name of the limited liability company: (must c	ontain "Limited Liability Company,"	"L.L.C.," or "LLC.")
conv of the written consent of the managers or mana	ging members adopting the alternate.	in Florida and attach a name. The alternate name
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.1. C." 6. If amending the registered agent and/or registered registered agent and/or the new registered office add	ging members adopting the alternate or "LLC.") officer address on our records, enter	name. The alternate name
copy of the written consent of the managers or mana must contain "Limited Liability Company," "L.1. C." 6. If amending the registered agent and/or registered	ging members adopting the alternate or "LLC.") officer address on our records, enterress here:	name. The alternate name the name of the new
copy of the written consent of the managers or mana must contain "Limited Liability Company," "L.L. C." 6. If amending the registered agent and/or registered registered agent and/or the new registered office add	ging members adopting the alternate or "LLC.") officer address on our records, enter ress here:	name. The alternate name the name of the name of the new
copy of the written consent of the managers or mana must contain "Limited Liability Company," "L.1. C." 6. If amending the registered agent and/or registered registered agent and/or the new registered office add Name of New Registered Agent:	ging members adopting the alternate or "LLC.") officer address on our records, enter ress here: Enter Florida Street	name. The alternate name the name of the name of the new

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
AMBR 	Vicky Bedi	3600 Sable Palm Ln., Unit H	= Add
		Titusville, FL 32780	□Rem
AMBR	Mark Rosario	Blk 13 Lot 16 Grand Terrace Subdivision	■Add
		Consolacion, Cebu, 6000 Philippines	
AMBR	Vicky Bedi	1603 Capitol Ave., Ste. 310 A464	□Add
		Cheyenne, WY 82001	≅Reme
AMBR	Mark Rosario	1603 Capitol Ave., Ste. 310 A464	□Add
		Cheyenne. WY 82001	≅Reme
			JAdd
aforementio	ned amendment(s), duly authentiunder the law of which this entity	than 90 days old, evidencing the icated by the official having custody of records in the y is organized.	□Remo

Filing Fee: \$25.00

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Chapters Media and Advertising, LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on January 10, 2020, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2020-000894488.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 18th day of February, 2020 at 1:05 PM. This certificate is assigned ID Number 034866026.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.