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2021 JUL 23 PH 2: 06 SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: D	igital Soldier	e Media	LLC	
SOBJECT:D	Name of Lim	ited Liability Company		_
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Stephen K. Bo	one	
	~-Pt	Name of Person		
	P	DOONE LAW F	7'rm	TA JUL 1805
	100	(A Venida d	del Circo	2021 JUL 23 PH 2: 06 SECRETARY OF STATE SECRETARY OF STATE
				2: 06 STATE E.F.L
	E-mail address:	leniu Fr City/State and Zip Code Flynn 064 et to be used for future annual re	gnail. Com	<u></u>
For further information of	concerning this matter, please co			
	Stephen K. Boone	at (94/)	488 - 6716	
Name o	of Person	Area Code	Daytime Telephone Nun	nber
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certi	0 Filing Fee, ficate of Status & fied Copy onal copy is enclosed)
Mailing Addre Registration Division of C	Section		dress: tion Section of Corporations	
P.O. Box 632	27	The Cen	tre of Tallahassee	
Tallahassee,	FL 32314		Monroe Street, Suit see, FL 32303	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Digital Soldiers N (Stame of the Limited Liability Compa (A Florida Limited	nedia LLC any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 9,000268024	1 1
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab Manasota Shores Real Estate	
The new name must be distinguishable and contain the words "Limited Liabi	lify Company," the designation "LLC" or the abbrevation "L.L.C."
Enter new principal offices address, if applicable:	ER E T
(Principal office address MUST BE A STREET ADDRESS)	22
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PH 2: 06 SSEE. FLE
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, 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>	Address	Type of Action
MGR	Michael G. Flynn, Jr	1811 Englewood Rd	□Add
			Remove
•			□Add
			□Remove
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