L12000116063

(Req	uestor's Name)			
(Address)				
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only

Por conversation with Lisa Tillmann Sopt. 28, she gave authorization put correct name and doc. # on Form and add ", LLC" to the new name. Spy 9/28/12



900240005579

09/27/12--01008--027 **25.00

FILED

12 SEP 28 PV 4: 35

SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
		Lisa Tillmann	
		Name of Person	
		Firm/Company	
		743 Edgewater Dr	
•	,	Orlando, FL 32804	
		City/State and Zip Code	
	E-mail address: (i	mtillmann@aol.com o be used for future annual report no	otification)
For further information cor	cerning this matter, please c	all:	
	<u> Fillmann</u>	at (_407)	443 0145
Name of F	rerson	Area Code & Dayt	ime Telephone Number
Enclosed is a check for the	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 Fee, Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

OF

12 SEP 28 PM 4: 33

Film For Justice

SECRETARY OF STATE

MEDIA FOR JUSTICE LLC FALL AHASSEE ELORIDA

(Name of the Limited Liability Company as it now appears on our records.)

(A F	lorida Limited Liability Company)	TS OIT BUT TOURS (
(= = -	, , , , , , , , , , , , , , , , , , ,	Sept. 21, 201 2	
The Articles of Organization for this dimited in	ility Company were filed on	•	
Florida document number		•	
		9048937	
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of the	he limited liability company he	re:	
C	inema Serves Justice, 1	LL	
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Comp	any," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
	······································		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
D. If amonding the projectional agent and/on	manistance of the address on		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new	
Name of New Registered Agent:			
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 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				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			_ _	
			□ Remove —	
			Remove	
			. Q.	
			Gid Kemove	
		-	d move	
	·		_	
<u> </u>				
			d d move	
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_	
Di II amen	ang any other mormation, enter change	(c) Here: (imach dadhional sheets, ij heetssary,		
_				
		······································		
_			_	
_			_	
Dated	September 24 201			
	•			
	Jisa M. Tellman Lisa M. Tillmann	or authorized representative of a member		
	Typed o	or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00