L13000100718

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COVER LETTER

TO:	Registration Sec Division of Corp				
CUD IE		y Digital, LLC			
SUBJE	UI:	Name of Limited Liability Company			
The encl	losed Articles of A	Amendment and fee(s) are submitted for filing.			
Please re	eturn all correspon	ndence concerning this matter to the following:			
	·	Paul Zadie			
	•	Name of Person			
		Firm/Company · · ·			
		85 Hollow Branch Rd.			
		Address Apopka, FL 32703			
		City/State and Zip Code zadie@zadie.com			
		E-mail address: (to be used for future annual report notification)			
For furth	ner information co	oncerning this matter, please call:			
Paul 2	Zadie	321 948-6766 at ()			
-	Name of				
Enclosed	d is a check for th	e following amount:			
\$25.0	00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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 OF

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Zip Code

Imaginary Digital, LLC	· ALEADAGSEL, FLORIDA
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company L13000100718 Florida document number	y were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited lial</u> Zadie Studio, LLC	bility company here:
The new name must be distinguishable and end with the words "Lim'L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
·	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

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 = Mana MGRN = Mar	Manager T= Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
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			Remove
			
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11/26/20	<u>, 13 </u>
Doub Zodi	Signature of a member or authorized representative of a member
Paul Zadi	
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00