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COVER LETTER

Div	vision of Cor	porations				
SUBJECT:	Qasle LLC					
SOBSECT		Name of Limi	ited Liability Company			
The enclosed	d Articles of ،	Amendment and fee(s) are subi	mitted for filing.			
		ndence concerning this matter	-			
		Eric Brown				
			Name of Person			
		Qasle LLC				
			Firm/Company			
		5055 S. Dale Mabry #832				
		· ···	Address			
		Tampa, Florida 33611				
		create@nami.productions	City/State and Zip Code			
		E-mail address: (t	to be used for future annual report	notification)		
For further in	nformation co	oncerning this matter, please ca	di:			
Eric Brown			813 605-903			
	Name of	Person	Area Code Day	vtime Telephone Number		
Enclosed is a	a check for th	e following amount:				
■ \$25.00 F	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 (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section

TO:

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**

Qaste LLC (Name of the Lin	nited Liability Comp	any as it now appears on our recor Liability Company)	<u>rds.</u>)			
	(A Florida Limited	Liability Company)				
The Articles of Organization for this Limited Liability Company were filed on Febuary 26, 2018						
Florida document number L18000050636	·					
This amendment is submitted to amend the fo	Howing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
Nami Productions LLC						
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if appl	icable:	7901 4th St N Ste 300				
(Principal office address MUST BE A STRE	ET ADDRESS)	St. Petersburg, FL 33702	7			
		Pinellas County	20 7			
Enter new mailing address, if applicable:		7901 4th St N Ste 300				
(Mailing address MAY BE A POST OFFICE	E BOX)	St. Petersburg, FL 33702	an an			
		Pinellas County	51			
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of	l/or registered of	Pinellas County ffice address on our record				
Name of New Registered Agent:	Registered Agents Inc					
New Registered Office Address:	7901 4th St N S	· <u></u>				
		Enter Florida street addre.	SS			
	St. Petersburg		lorida <u>33702</u>			
		City	Zip Code			

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 Changing Registered Agent, Signature of New Registered Agent

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
			□ Add
			☐ Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change
			☐ Remove
			Change
			□ Remove
			□ Change
			□ Remove
			□ Change

D. If amending any other inform:	ation, enter change(s) her	e: (Attach additiona	•	
				<u>·</u>
		 		
				
	<u> </u>	·		
				
	·			
-				
			·	
E. Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the D	lock does not meet the applic	able statutory filing re	(optional) than 90 days after filing.) Pursuant equirements, this date will not l	to 605.0207 (3)(be listed as the
f the record specifies a delayed b) The 90th day after the rec		ot an effective tim	e, at 12:01 a.m. on the	earlier of:
Dated March 6 2019	2019	•		
73	,	·		
- ' -	Signature of a member or author	orized representative of a	ı member	
Eric Brown				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00