L18000189631

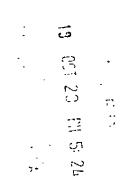
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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September 26, 2018

RICARDO DEROSE 4311 LONG KEY LANE, APT 19309 WINTER PARK, FL 32792

SUBJECT: MUNCH MASH, LLC Ref. Number: L18000189631

We have received your document for MUNCH MASH, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 818A00020137

Octavia L Simmons Regulatory Specialist III

(b)

2018 DCT 2.3 | P. 11: F.

COVER LETTER

SUBJECT:	DeroseEnte	ertainmen t LLC					
SUBJECT:		Name of Limi	ted Liability Company				
The enclosed	I Articles of A	Amendment and fee(s) are subt	nitted for filing.				
Please return	all correspon	dence concerning this matter t	to the following:				
		RicardoDerose					
			Name of Person				
		DeroseTransportationLL0					
	Firm/Company						
		4311Long Key Lane, Apt	19309				
			Address				
		Winter Park, Florida, 3279	2				
		rickyderose@yahoo.com	City/State and Zip Code				
		E-mail address: (to	o be used for future annual report notific	cation)			
For further in	iformation co	ncerning this matter, please ca	II:				
RicardoDer	ose		347 856-4331				
	Name of	Person	at () Area Code Daytime	Telephone Number			
Enclosed is a	check for the	following amount:					
□ \$25.00 F	iling Fee	S30.00 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:

TO:

Registration Section Division of Corporations

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

(Name of the Limited Liabil	ity Company as it now appears on our record a Limited Liability Company)	ds.)
The Articles of Organization for this Limited Liability C Florida document number L18000189631		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	· 📆
DeroseEntertainmentLLC		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLO	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		23
Principal office address MUST BE A STREET ADDE	RESS)	P 1
		<u>ب</u> بن
		> =
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered agent and/or the new registered office add		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	5,5
	. FI	orida
	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 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>Titie</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Kumar Saurav		
			■ Remove
			☐ Change
MGR	RicardoDerose	4311 Long Key Lane, Apt 19309 Winter Park, FL, 32792	Add
			□ Remove
			Change
			Z3 Add Add ST Remove
			☐ Change
			Add
			☐ Remove
			_□ Change
			Add
			□ Remove
			☐ Change
	 		
			☐ Remove
			□ Change

Film ProductionCompanybased	in Winter Park,Florida.	
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	pecific and cannot be prior to date of filing or	(optional) r more than 90 days after filing.) Pursuant to 60
nent's effective date on the Departi		ling requirements, this date will not be lis
cord specifies a delayed off		e time, at 12:01 a.m. on the earl
e 90th day after the record i		
90th day after the record i	2018	
September03 Ricardo I	2018	arde

Page 3 of 3

Filing Fee: \$25.00