L19000026863

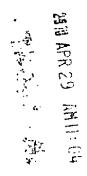
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilios Eliliy Hallis)
(Document Number)
(Bocament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400328300814

04/29/19--01011--020 **25.00





COVER LETTER

THE RESERVE OF THE PARTY OF THE OVERCOMER FILMS, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jacqueline Cooke Name of Person Resilia Firm/Company 365 Canal St Suite 701 Address New Orleans, LA, 70130 City/State and Zip Code jacqueline@resilia.co E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jacqueline Cooke Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS:

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

TO:

Registration Section Division of Corporations

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

TO ARTICLES OF ORGANIZATION OF

OVERCOMER FILMS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number L19000026863 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: OC Films and Productions, LLC The new name must be distinguishable and contain the words "Limited 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Cin 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

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, FS. 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.

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Keith A Weimer		□ Add
		3770 Golden Gate Blvd W Naples, FL, 34120	■ Remove
			Change
MGR	Sharlene Weimer	3770 Golden Gate Blvd W Naples, FL, 34120	
			□ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
	· · · · · · · · · · · · · · · · · · ·	 	Add
			□ Remove
			Change
			Remove
			Change
			Remove

_ Change

 				
·	·			

		-	·····	
				
		5		
			· · · · · · · · · · · · · · · · · · ·	
······································		·	n, de B	
			,	
	<u> </u>			
		·		
				
ffective date, if other than the an effective date is listed, the date mu ote: If the date inserted in this biocument's effective date on the D	st be specific and cannot be prior to ock does not meet the applical	o date of filing or more than ble statutory filing require	(optional) 90 days after filing.) Pursuant to ements, this date will not be	o 605.020 e liste d a
e record specifies a delayed The 90th day after the rec	ord is filed.			arlier o
April 23rd	2019		/ '-	
atcu	, 2019	- S. palleru	Mermo	
 -	Signature of a member or author	ized representative of a mer	nber	_
Sharlene Weimer				
	Typed or printed	I name of signee		_
	· · · · · · · · · · · · · · · · · · ·	₩		

Page 3 of 3

Filing Fee: \$25.00