L22000092362

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COVER LETTER

	ration Sect on of Corpo						
E SUBJECT:	LEVATE P	RODUCTION AND ENTER	RTAINMENT LLC				
SUBJECT: _		Name of Lim	nited Liability Company		-		
The enclosed A	rticles of A	mendment and fee(s) are sub	omitted for filing.				
Please return al	l correspond	dence concerning this matter	to the following:				
		ZAZZARO. HANNAH					
		_	Name of Person				
	ELEVATE PRODUCTION AND ENTERTAINMENT LLC						
Firm/Company							
		3914 ORCHARD HILL C	TIR			ρωΣ 1 :	
			Address		<u> </u>		
		PALM HARBOR, FL 346	684			ను చ	
			City/State and Zip Code		SSEE,	2-5 PH 1:3	٠.
For further info	rmation con	E-mail address: (cerning this matter, please c	to be used for future annual report notificat	ion)	FL	<u></u> ယ	
ZAZZARO, HA	ANNAH		+1 (727) 916-0352				
	Name of P	erson		lephone Num	iber	_	
Enclosed is a ch	neck for the	following amount:					
■ \$25.00 Filin	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif	icate of Sied Copy	Status &	
	g Address: tration Se	ction	Street Address: Registration Section	un.			
_	ion of Cor		Division of Corpor				
P.O. I	Box 6327		The Centre of Tall	ahassee			
Tallal	nassee, FL	. 32314	2415 N. Monroe S	treet, Suite	e 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000092362	were filed on 01/22/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
ELEVATE PRODUCTIONS AND ENTERTAINMENT LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		Col
• • •		. **
(Principal office address MUST BE A STREET ADDRESS)	1 -	· · · · · · · · · · · · · · · · · · ·
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		(())
Enter new mailing address, if applicable:		n = 1
(Mailing address MAY BE A POST OFFICE BOX)	بىر. ئارى	/) **
		1 ω
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	e of the new regi
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 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 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>	Name	Address	Type of Action
			□Remove
			□Change
			□Add
			□ Remove
			□ Change
	.		Add Remove
			Remove ASSET DChange STATE Add
			□Add
			□Remove
		-	□Change
			□Remove
			☐ Change
			□Add
		 .	Remove
			Change

fective date, if other than the date of filing: (opt a effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after. If the date inserted in this block does not meet the applicable statutory filing requirements, the cument's effective date on the Department of State's records. (ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (is filed.)			
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1ed	(b) The 90	0th day	after the
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	>		
Signature of a member or authorized representative of a member			_
Typed or printed name of signee			