# Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L10000097409 Entity Name: ZZ PRODUCTIONS, LLC

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **Current Principal Place of Business:**

19821 NW 2ND AVE SUITE 413 MIAMI GARDENS, FL 33169

#### **Current Mailing Address:**

C/O GGCFO 33 W. ONTARIO STREET 56AB CHICAGO, IL 60654 US

## FEI Number: 46-3947488

#### Name and Address of Current Registered Agent:

GORDEN, GINGER C/O WADE 19821 NW 2ND AVENUE 413 MIAMI GARDENS, FL 33169 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MGRM	Title	AUTHORIZED REPRESENTATIVE
Name	WADE, DWYANE	Name	GORDEN, GINGER
Address	19821 NW 2ND AVE SUITE 413	Address	19821 NW 2ND AVE SUITE 413
City-State-Zip:	MIAMI GARDENS FL 33169	City-State-Zip:	MIAMI GARDENS FL 33169

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

# SIGNATURE: GINGER GORDEN

AUTHORIZED REPRESENTATIVE 04/01/2019

Date

FILED Apr 01, 2019 Secretary of State 2298765770CC

Certificate of Status Desired: No

Date