L0500018138

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

8 APR 11 PH 12: 1

COVER LETTER

TO: Registration 9 Division of Co	
SUBJECT: 13 Minu	ute Productions, LLC
	(Name of Limited Liability Company)
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
	Robert K. Rushing (Name of Person)
	(Name of Letson)
	Robert K. Rushing, Attorney at Law, P.L.
	(Firm/Company)
	1022 Park Street, Suite 305
	(Address)
	Jacksonville, FL 32204
	(City/State and Zip Code)
For further information	concerning this matter, please call:
Robert K. Rushin	g at (904) 328-2065
(Name	e of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for	the following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

13 Minute Productions, LLC	phility Company as it now appears on	our records)
(A Flo	ability Company as it now appears on orida Limited Liability Company)	our recorus.)
The Articles of Organization for this Limited Liabi Florida document number <u>L05000018138</u>	ility Company were filed on <u>Februa</u>	ry 18, 2005 and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Company,"	the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		7
	(Enter F	Florida street address)
_	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:	
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	per and complete performance of m red agent as provided for in Chapte istered office address, I hereby con ange.	y duties, and I am familiar with and or 608, F.S. Or, if this document is firm that the limited liability A C

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Milan Malinovic	7910 Linkside Drive Jacksonville, FL 32256	Add Remove
<u>MGRM</u>	Jose Cardenas, Jr.	439 Ashcroft Landing Drive Jacksonville, FL 32225	Add Remove
			Add Remove
			AddRemove
			AddRemove
			Add
D. If amend	ing any other information, ent	er change(s) here: (Attach additional sheets, if neces	esary.)
_			
Dated April	J.P.	a member or authorized representative of a member	2008 APR I I SECRETURY TALLAHASSE
	Logan Rink	Typed or printed name of signee	PHIE: 42
		Page 2 of 2 Filing Fee: \$25.00	ALE STORY