## L06000118670

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(Address)
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B. KOHR

FEB - 5 2009

**EXAMINER** 

OPFEB-4 AMIO: 35

## · COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: D&YI	Productions, LLC.		
		ited Liability Company)	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	·
Please return all corresponden	ondence concerning this matter	to the following:	
	Derek MOLLIEX		10.09
		(Name of Person)	FEB-L MIN: 35
	D & Y Productions, LLC.		in the least of th
		(Firm/Company)	38.
	5450 NW 114th. Ave. Su	ite 108	To the second
		(Address)	
	Doral, FL 33178	•	
	i	(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Derek MOLLIEX		at ( 786 ) 285-2424	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he following amount:	1	
□ \$25.00 Filing Fee	□\$30.00 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)
Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations tox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D & Y Productions, LLC.

(Name of the Limited Liability Company as it now appears on our records.

(A F	lorida Limited L	Liability Company)		· ·	
The Articles of Organization for this Limited Lial	bility Company	were filed on 12/13/2006		and assigned	
Florida document number L06000118670	··		Š.		
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	oility company here:			
N/A					
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company," the	designation "LI	C" or the abbreviat	on
Enter new principal offices address, if applical	ole:	11251 NW 20 ST. Suite	<del>1</del> 01		_
(Principal office address MUST BE A STREET	ADDRESS)	Doral, FL 33172			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0x)</u>				-
B. If amending the registered agent and/or registered agent and/or the new registered offi			ords, <u>enter th</u>	e name of the n	- e <b>w</b>
Name of New Registered Agent:	N/A				-
New Registered Office Address:					_
		(Enter Flo	rida street addi	ress)	
			_, 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 608, 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 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

	<u>Name</u>	Address	Type of Action
	N/A		Add Remove
	•		Add Remove
D. If amen	ding any other information, enter chan		<i>y.)</i> 
			<i>y.)</i> 
<u>N/</u>			y.) 

Page 2 of 2

Filing Fee: \$25.00