L07000118591

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
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09/10/12--01022--003 **25.00

12 SEP 19 PH 2: 41

SEP 2 0 2012 T. HAMPTON

COVER LETTER

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Registration Section

P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Cor	porations ,						
SUBJECT:	Michael Anthony	Elite Photography LLC					
Scholer.		Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing					
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspon	ndence concerning this matter	to the following:					
		_					
	Michael A Sabatino						
		Name of Person					
	Michael Anthony Elite Photography LLC						
		Firm/Company					
	10040 CM FOrd Ch Cuita F11						
	12240 SW 53rd St Suite 511 Address						
	Cooper City FI 33330						
		City/State and Zip Code					
michael@michaelanthonyphoto.com E-mail address: (to be used for future annual report notification)							
For first or information of	·	·	,				
ror turther information ca	oncerning this matter, please c	an:					
Micha	ael A Sabatino	at (954) 68	30-5606				
Name of Person		Area Code & Daytime Telephone Number					
Enclosed is a check for th	ne following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,				
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy				
		(additional copy is enclosed)	(additional copy is enclosed)				
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section					
Registration Section		Registration Section Division of Cornorations					

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



RECEIVED

12 SEP 19 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

September 11, 2012

MICHAEL A SABATINO 12240 SW 53RD ST STE 511 COOPER CITY, FL 33330

SUBJECT: MICHAEL ANTHONY ELITE PHOTOGRAPHY LLC

Ref. Number: L07000118591

We have received your document for MICHAEL ANTHONY ELITE PHOTOGRAPHY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 212A00022914

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 SEP 19 PM 2: 41

Michael Anth	hony Elite Ph	notography	LLC				
(Name of the Limited Liab (A Flori	i <mark>lity Company as</mark> ida Limited Liabili	it now appears of y Company)	our records.				
		C1 1	11 29 07				
•	The Articles of Organization for this Limited Liability Company were filed on and assigned						
Florida document numberL07000118591	 •						
This amendment is submitted to amend the following	g:						
A. If amending name, enter the new name of the	limited liability o	ompany here:					
Stu	ıdio M Photogi	aphy () C					
The new name must be distinguishable and end with the "L.L.C."	words "Limited Li	ability Company,	' the designation "LLC	or the abbreviation			
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET AL	DDRESS)						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX	2						
		- · · · · · · · · · · · · · · · · · · ·					
B. If amending the registered agent and/or re		iddress on our	records, enter the	name of the new			
registered agent and/or the new registered office a	address here:						
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
			, Florida				
•	Cit	y		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** Title **Address** <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 9-1-12 Signature of a member or authorized representative of a member Michael A Sabatino Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00