L07000120394

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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2016 AUG -4 PM 2: 32 SECRETARY OF STATE

K.SALY EXMINER

AUG 5



July 21, 2016

KUMAR PICTURES LLC JAMES SILER 4621 WHEELER AVE. JACKSONVILLE, FL 32210

SUBJECT: KUMAR PICTURES LLC

Ref. Number: L07000120394

We have received your document for KUMAR PICTURES LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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.

Letter Number: 116A00015323

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: ' Registration Se Division of Cor			
SUBJECT: Ke	MAR PICTURES Name of Lim	LLC ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	James Si	, LEX	
		Name of Person	
	KUMAR F	Picrumes LLC Firm/Company	
•			
	4621 WAS	Address	
	JACKSONY	UE, FL 32210	
	iames &	City/State and Zip Code Lyman in the Code to be used for furtire annual report notifications.	COM
			ication)
For further information c	oncerning this matter, please c		
JAMES SIL Name o	f Person	at (<u>904</u>) <u>502 -</u> Area Code Daytime	: D265 : Telephone Number
Enclosed is a check for the	ne following amount:		
\$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)

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

ARTICLES OF ORGANIZATION **OF**

ARTICLES OF ORGANIZATION OF Lungar Pictures LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/03/07 and ass Florida document number 10 7000/20394	1/ ~
The Articles of Organization for this Limited Liability Company were filed on	The Control of the Co
The Articles of Organization for this Limited Liability Company were filed on	han
The Articles of Organization for this Limited Liability Company were filed on	PH 2: 2
	Or Size
Florida document number	igned OPID's
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.I	L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
·	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the name of	of the new
registered agent and/or the new registered office address here:	
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 Changing Registered Agent, Signature of New Registered Agent

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> <u>Address</u> **Type of Action** Name . KENDRA SILEK-MARSIGUO GAINESVILLE, FL 32607 □ Add Remove ☐ Change □ Add □ Remove □ Change ☐ Add ☐ Remove ☐ Change _□ Add □ Remove _ Change ☐ Add □ Remove ☐ Change

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effective date is list e: If the date inse	her than the date of filing:ed, the date must be specific and cannerted in this block does not meet the	he applicable statutory filing re		
iment's effective	date on the Department of State's	s records.		
ne 90th day a	es a delayed effective date, fter the record is filed.			the earlier of
ed <u>Avg</u> u	James Siles	2016		
(James X			
	Signature of a memb	er or authorized representative of	member .	

Page 3 of 3

Filing Fee: \$25.00