L080000/1940

. (Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200121724562

04/01/08--01015--011 **43.75



A. LUNT
APR - 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Shalkboard Productions, LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
VICENTE A. Lugo
VICENTE A. LUGO (Name of Person) Chalkboard Productions, LLC (Firm/Company) 2001 Biscayne Blud. # 403 (Address)
2001 Biscayne Blud. # 403
Miami, Fla 33137 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (786) 262-956 PS TO (Area Code & Daytime Telephore Sumber)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \\$30.00 Filing Fee \& \times \

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

	- -	
	board Producti	
(Name of the Limited	I Liability Company as it now appears on A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited L	iability Company were filed on	ORIGA and assigned
Florida document number <u>L 0 8 0 0 0</u>	0011940	
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name of Chalk board Property	of the limited liability company here: 20 ductions, LLC	ZECRE AP
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limited Liability Company,"	the compation "LLC" on the abbreviation
B. If amending the registered agent and registered agent and/or the new registered o		recommend the name of the new
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Enter	Florida street address)
	(27116)	. 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:

Name	<u>Address</u>	Type of A
		Add Remove
		Add
		Add
		——————————————————————————————————————
		Add Remove
		Add Remove
mending any other infor	rmation, enter change(s) here: (Attach additional shee	ts, if necessary.)
	· · · · · · · · · · · · · · · · · · ·	7ALI
None		
		-
	7 . 2008 . 0	FILED 100 APR +2 P D: 03 ECRETARY OF STATE LAHASSEE, FLORIDA

Filing Fee: \$25.00