

LD80000039580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L. SELLERS

MAY 12 2008

EXAMINER

~~WDS 2/11/08~~

Office Use Only



000125859150

04/28/08--01013--004 **25.00

2008 MAY -8 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Carlos Calante
Shugzar Productions
228 NW 85th CT
Miami, FL 33126

Registration Section
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

On April 21, 2008 I filed my production company online in through the sunbiz.org website as an LLC. Mistakenly I made a typing error while filing the name of the company.

The correct name should be: **SHUGZAR PRODUCTIONS LLC**

On the form it shows as: *SHUZGAR PRODUCTIONS LLC*

Thank you for your help. Please feel free to contact me at my cell at 305-302-4114 or through my e-mail at calantec@gmail.com.

Sincerely,


Carlos Calante

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Name correction for Shugzar 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:

Carlos Calante
(Name of Person)

Shugzar Productions LLC
(Firm/Company)

228NW 85th Ct
(Address)

Miami, FL 33126
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos Calante at (305) 302-4114
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2008

CARLOS CALANTE
228 NW 85TH COURT
MIAMI, FL 33126

SUBJECT: SHUZGAR PRODUCTIONS LLC
Ref. Number: L08000039580

We have received your document for SHUZGAR PRODUCTIONS 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 908A00026299

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Shugzar Productions 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 04/21/08 and assigned
Florida document number L 08 000039580

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SHUGZAR PRODUCTIONS LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

B. If amending the registered agent and/or registered office address on our records, enter the name 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 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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____,

Signature of a member or authorized representative of a member

Carlos Calante

Typed or printed name of signee

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 2008 MAY -8 PM 1:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA