

208 000 116 606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

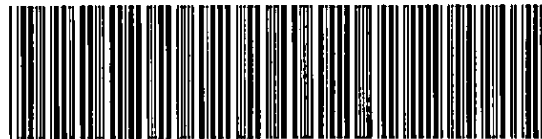
(Business Entity Name)

(Document Number)

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OCT 21 2019

2019 OCT 21 PM 11:24

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IMAGINE 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:

ELIZABETH MONTEALEGRE

Name of Person

DAYBOOKS

Firm/Company

PO BOX 530302

Address

MIAMI, FL 33153

City/State and Zip Code

DAYBOOKS@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHILIPPE BOUTBOUL

514 808-3307
at ()

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

October 3, 2019

ELIZABETH MONTEALEGRE
PO BOX 530302
MIAMI, FL 33153

SUBJECT: IMAGINE PRODUCTIONS, LLC
Ref. Number: L08000116606

We have received your document for IMAGINE PRODUCTIONS, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 419A00020427

RECEIVED

2019 OCT 21 1:12:22

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

IMAGINE PRODUCTIONS, LLC

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

2019 OCT - 21 AM 11:24

The Articles of Organization for this Limited Liability Company were filed on 12/24/2008 and assigned
Florida document number L08000116606.

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.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1100 WEST AVE

#1426

MIAMI BEACH, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 530302

MIAMI, FL 33153

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:

Elizabeth Montealegre

New Registered Office Address:

12 NW 86 street

Enter Florida street address

MIAMI

City

33150

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>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------|-----------------------|--|
| MGR | PHILIPPE BOUTBOUL | 5600 COLLINS AVE | <input type="checkbox"/> Add |
| | | #5W | <input checked="" type="checkbox"/> Remove |
| | | MIAMI BEACH, FL 33140 | <input type="checkbox"/> Change |
| AMBR | NICOLAS OFFRET | 701 NE 77 STREET | <input checked="" type="checkbox"/> Add |
| | | MIAMI, FL 33138 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated AUGUST 23 2019

Signature of a member or authorized representative of a member

PHILIPPE BOUTBOUL

Typed or printed name of signee