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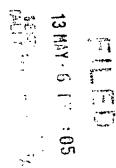
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HAY N? 2013 D. BUTLER

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: 6MW INSPIRATIONAL FUNSILL Name of Limited Liability Company
Division of Corporations	
Please re	eturn all correspondence concerning this matter to the following:
	Maritu Guinel Name of Person
	6 MW Inspirational Film, LCC Firm/Company
	255E 2nd Due Svite 31Z
	M'i Arri Floring 33131 City/State and Zip Code maritzagring & smal-can E-mail address: (to be used for future annual report notification)
For furth	
_p{	All the Course at 305 305 1949 Name of Person Area Code & Daytime Telephone Number
Enclosed	is a check for the following amount:
. 1	00 Filing Fee \(\text{Certificate of Status} \) \[S55.00 Filing Fee &

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

6 MW INSPIRAT	TOPAL FILMS	, uc
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our reconiability Company)	<u>rdš.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L0900004772</u> .	were filed on//4/09	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company here:	
^		↓ · · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end with the words "Limit" L.L.C."		
Enter new principal offices address, if applicable:	25 5E 2nd	Ave Svile 312
(Principal office address MUST BE A STREET ADDRESS)	Miani, Flor	Ave Svite 312 2100 33131
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	255E 2nd MPani, Fl	Are Suite 312 33731
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
		rida
	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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>A</u> ddress	Type of Action
M66	Sonya Goinel	1800 NE 179 Steet	
		M: smi F1 33162	2 Remove
MOL	Sonder Goinet	1800 NE1795Free	
		Mismi F1 33162	Remove
			Add
			Remove
			Add
		7.	Remove
			Add
			Remove
			Add
			Remove

lt an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
٠	
ated_	4/3
atea	
	Signature of a member or authorized representative of a member
	Maritza Geinet
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00