

LD90000 45705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

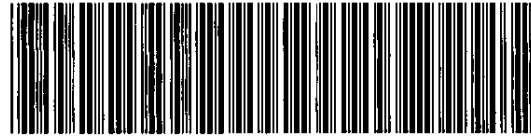
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900187224149

11/01/10--01008--019 \*\*30.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 NOV - 1 AM 11:18

N. Culligan NOV 2 2010

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Core Inno Design, 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:

Maria Gabriela Gil

Name of Person

Core Inno Design, LLC

Firm/Company

5550 NW 44th St. apt. 404

Address

Lauderhill, FL 33319

City/State and Zip Code

mgg.smart@gmail.com

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

For further information concerning this matter, please call:

Maria Gabriela Gil

Name of Person

at ( 954 )

681-1257

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

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 NOV -1 AM 11:18

Core Inno Design, 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 May 11, 2009 and assigned  
Florida document number 600155772516.

This amendment is submitted to amend the following:

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

"O" 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."

**Enter new principal offices address, if applicable:**

7125 Woodmont Way

**(Principal office address MUST BE A STREET ADDRESS)**

Tamarac, FL 33321

**Enter new mailing address, if applicable:**

7125 Woodmont Way

**(Mailing address MAY BE A POST OFFICE BOX)**

Tamarac, FL 33321

**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

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>
MGRM	Maria Gabriela Gil		<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Ricardo Mosquera		<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.)*

The functions of the company are: Any and/ or all Event Planning, Including  
but not limited to: Shows, Decorations, Entertainment for any kids, adults &  
Corporate events.

Dated October 20, 2010

Signature of a member or authorized representative of a member

Maria Gabriela Gil

Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
10 NOV - 1 AM 11:18