## 0900008/185

(Requestor's Name)	
(Address)	
(Address)	
(Audiess)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
A. LUNT	
MAR <b>2 9</b> 2010	
EXAMINER	ļ

Office Use Only



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## **COVER LETTER**

Division of Co				
SUBJECT:	he Seeds o-	F Evolution, L	LC	
· · · · · · · · · · · · · · · · · · ·	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:	•	
	Brad	Pawla K Name of Person	2011 MAR 25	francisco materiaco a materiaco materiac materiaco materiac materiac materiaco materiac materiaco materiaco materiaco materiaco materiaco materiaco materiaco materiaco materiac materia materia materia materia materia materia mate
	10:10	Productions Firm/Company	[ T ] - T-	
	980 51	W 31st St.	M 9: L7	م <sub>يدويد</sub> ه
		Address	-بون	
	beaw	city/State and Zip Code  [AK 982] (1) ya  to be used for future annual report notifica	33315 Loo.com	
For further information of	concerning this matter, please c	all:		
Brad Po	aw a C	at (305) 766 - 3	3322 Felephone Number	
Enclosed is a check for t	he 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
Chifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

I he seeds of t	Evolution 6			
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our ability Company)	records.)		
The Articles of Organization for this Limited Liability Company w	vere filed on	شسم ۱۱۶ سم		
Florida document number				
This amendment is submitted to amend the following:		25 AH		
A. If amending name, enter the new name of the limited liabili	ity company here:	<b>ب</b> .نــــــــــــــــــــــــــــــــــــ		
10:10 Productions LLC	<del>^</del>			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the d	lesignation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	not a	oplicable		
(Principal office address MUST BE A STREET ADDRESS)		V		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	not ap	olicable.		
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:		rds, enter the name of the new		
Name of New Registered Agent:	ot applica	able		
New Registered Office Address:	Enter Floria	la street address		
	arrest a for even an our section our			
	City ,	Florida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member			
<u>Title</u>	<u>Name</u>		Address	Type of Action
				Add Remove
		····		Add Remove
	not	apolia	cable	
				<b>3 3 3</b>
				Add On Remove
		<del></del>	·	Add Remove
				Add
D. If amen	ding any other informat	ion, enter change	(s) here: (Attach additional sheets, if necessar	Remove
		0 5 +	applicable	
_		710.	PPICAGIA	
_				
Dated	3/24	<u>, 201</u>		,
	Sign	ature of a member o	r authorized representative of a member	all for the same
	<u> Ulua</u>		r printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00