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11 MAT -5 AM IN: 24

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAY - 9 2011

**EXAMINER** 

## **COVER LETTER**

то:	Registration Sec Division of Corp			•	
SUBJI					
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please	return all correspor	ndence concerning this matter	r to the following:		
		He	ctor L. Vazquez-Negroni Name of Person		
		Neg	roni Photographers, LLC	<u>.                                    </u>	
	Firm/Company				
	159 Cypress View Lane				
	Address				
Groveland, FL 34736  City/State and Zip Code					
	_				
		E-mail address: (	negroniphotographers.com to be used for future annual report no	tification)	
For fur	ther information co	ncerning this matter, please of	all:		
		Vazquez-Negroni	at ( 321 )	206-4223	
	Name of	Person	Area Code & Dayt	ime Telephone Number	
Enclose	ed is a check for the	e following amount:			
□\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	\$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/COUR Registration Sec Division of Corp Clifton Building 2661 Executive of Tallahassee, FL	orations Center Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

11 MAY -5 AM 1: 24

Negroni Ph	noto and Cinema	, LLC
(Name of the Limited Liability	y Company as it now ap Limited Liability Compa	pears on our records.)
The Articles of Organization for this Limited Liability (	Company were filed on	September 11, 2009 and assigned
Florida document number L0900088113		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company	<u>here</u> :
Negroni :	Photographers, LL0	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Co	mpany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		on our records, <u>enter the name of the new</u>
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

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action **Address Title** <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Hector L. Vazquez-Negroni Typed or printed name of signee

• If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00