## L09000097902

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(Address)					
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PICK-UP	☐ WAIT	MAIL			
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C. LEWES

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EXAMINER

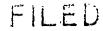
## **COVER LETTER**

TO;	Registration Sect Division of Corpo			· · · · · · · · · · · · · · · · · · ·
SUBJECT: NUSOUTH P			RODUCTIONS, LLC	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	dence concerning this matter	to the following:	
		٨	NATHANIEL MOORE	
NUSO			Name of Person	
			JTH PRODUCTIONS, LL	C
			Firm/Company	
Į.		5	802 SW 88TH TERR	
		- · · · <del>-</del> ·	Address	
		co	OPER CITY, FL 33323	
NUSOUTH			City/State and Zip Code	<del></del>
			MUSICGROUP@GMAIL.	COM
		•	to be used for future annual report no	ification)
For fur	ther information cor	ncerning this matter, please c	all:	
	NATHA	NIEL MOORE	at ( 786 )	426-8466
Name of Person			me Telephone Number	
Enclos	ed is a check for the	following amount:		
\$25	5.00 Filing Fee	<b>✓</b> \$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)
		NG ADDRESS:	STREET/COUI Registration Sec	RIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2010 NOV - 8 PM 28: 21

Nu	South Productions, LLC	SEURE TAR	PURSTATE:
(Name of the Limited I	Liability Company as it now appear Florida Limited Liability Company)	s on our records.	ECH COMBA
The Articles of Organization for this Limited Lia	ability Company were filed on	10/09/2009	and assigned
Florida document numberL09000097	902		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE L	3 <i>0X</i> )		
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street add	dress
		, 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 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 **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> MGR CAWANNA MCMICHAEL ☐ Add
✓ Remove 11780 NW 19TH PLANTATION, FL 33323\_ ☐ Add Remove ☐ Add Remove Remove ∏Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ۵ NOVEMEBER 3 2010 Dated Signature of a member or authorized representative of a member NATHANIEL MOORE Typed or printed name of signee

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Filing Fee: \$25.00