L09000111001

(Requ	estor's Name)	<u> </u>
(Addre	200	
(ADDA)	#55 <i>)</i>	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	

Office Use Only



800352380078

RECEIVED SEP 2 8 2020

89/29/20--01009--008 **++**80.00



D. BRUCE NOV 0: 2020

COVER LETTER

TO: Registration Se Division of Cor				
Divine Dest	iny Entertainment Group LLC			
SUBJECT:	Name of Lim			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Dr. Charles Bridges			
		Name of Person		
	Divine Destiny Entertainm	ent Group		
		Firm/Company		
	2955 Top Water Way			
		Address		
	Kissimmee Florida 34746			
	cwbridge@hotmail.com	City/State and Zip Code		2020 SEP 29 PM 1:5
	E-mail address: (to be used for future annual report notific	ation)	P 2
For further information c	oncerning this matter, please c	all:		331 9 ·
Dr. Charles Bridges	Ш	217 390-6124		
Name o	f Person		Felephone Number	<u> </u>
Enclosed is a check for the	ne following amount:		/	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addres		Street Address:	·	
Registration S		Registration Sect		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.)			
The Articles of Organization for this Limited Liability Company Florida document number 1.09000111001		and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
INCIZION MULTIMEDIA GROUP®LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	3255 SOUTH JOHN YOUNG PARKW	ΛΥ		
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE FLORIDA 34746			
Enter new mailing address, if applicable:	3255 SOUTH JOHN YOUNG PARKW	AY		
(Mailing address MAY BE A POST OFFICE BOX)	KISSIMMEE FLORIDA 34746			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the nam Enter Florida street address Florida	2020 SEP 29 PH 1		
	City , Florida	Zip Code Cn		
N. D. Carlotta and C. C. Carlotta D. Carlo		, to &		

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			□Add
			□Remove
			Change
			
			□Remove
			2020 the 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
			29d PR
			Remove
			; r → Change
			□Remove
			□Change
			□Remove
			Change .

·	<u>., , </u>					
				· · · ·		
						
-						
				 -		
	-					
					- CO	2020
						NO SEP
					= -	P 29
					<u></u>	
					in.	
			·		(56
				,		
ctive date, if other	er than the date of I, the date must be specif	filing:	ior to date of filing	or more than 90 days	optional) after filing.) Pursua	nt to 605.02
<u>e:</u> If the date insert	ted in this block does ate on the Departmen	not meet the app	licable statutory	filing requirements	, this date will no	t be listed :
ord specifies a dela filed.	nyed effective date, bu	ut not an effectiv	e time, at 12:01 a	.m. on the earlier o	f: (b) The 90th (lay after th
wednesday.	. SEPTEMBER 23	2020				
		<u> </u>	·			

Typed or printed name of signee