

400000/2521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

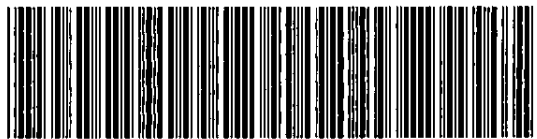
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800168435938

02/24/10--01031--026 **55.00

T. CLINE

MAR - 1 2010

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB 26 PM 3:20

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2010

RUSS HOSKINS
HOSKINS QUIROS & LABEAUME CPA, LLC
926 LAKE BALDWIN LANE
ORLANDO, FL 32814

SUBJECT: BROADWAY PHOTOGRAPHICS, LLC
Ref. Number: L10000012521

We have received your document for BROADWAY PHOTOGRAPHICS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 710A00004688

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB 26 PM 3:20

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Broadway Photographics, 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:

Russ Hoskins

Name of Person

Hoskins Quiros & LaBeaume CPA, LLC

Firm/Company

926 Lake Baldwin Lane

Address

Orlando, FL 32814

City/State and Zip Code

russhoskins@hcpaonline.com

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

For further information concerning this matter, please call:

Rayela Vinson

Name of Person

at (407)

767-6588

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

FILED
2010 FEB 26 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Broadway Photographics, 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 2/3/10 and assigned
Florida document number L10000012521

This amendment is submitted to amend the following:

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

Broadway Fotographics, 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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

2010 FEB 26 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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>
_____	_____	_____	☐ 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.)

Dated _____

Signature of a member or authorized representative of a member

Russell C. H. [Signature]
 Typed or printed name of signee

2010 FEB 26 PM 3:20
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED