## L11000002778

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	#)
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SECRETARY OF STATE
AND ANASSEE FI DOM: A

G. HARVEY

MAY 1 1 2011

EXAMINER

## **COVER LETTER**

TO:'	Registration Sec Division of Corp				
SUBJE	7CT∙	Life to	Movie, LLC		
50 1501			ed Liability Company		-
The on	alosad Artialas of	Amendment and fee(s) are sub-	mitted for filing		SECON N
			_		最一
Please	return all correspor	ndence concerning this matter	to the following:		FILED PN 3:22
			Osmin Hernandez		Self w
			Name of Person		22
			Life to Movie LLC		·
			Firm/Company		_
		90	Alton Road Unit 2603	3	
		<del></del>	Address		_
		Mi	ami Beach, FL 33139	1	
			City/State and Zip Code		_
		life	tomovie@gmail.com	et notification)	
For fur	ther information co	ncerning this matter, please ca		nt notification;	
	Osmi	n Hernandez	at ( 786 )	337-0517	·
	Name of	Person	Area Code &	Daytime Telephone Numb	ег
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 en	Certific aclosed) Certific	filing Fee, cate of Status & ed Copy onal copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	Registration Division of Clifton Build	Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Life to Mo	ovie LLC	\frac{\frac{1}{2}}{2}	B G LED
( <u>Name of the Limited)</u> (A	<mark>l Liability Comp</mark> a A Florida Limited I	ny as it now appears or Liability Company)	our records.)	71.0
The Articles of Organization for this Limited L		were filed onJan	uary 7th, 201	andrassigned
Florida document numberL11000002	<u> </u>			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and end with L.L.C."	th the words "Lim	ited Liability Company,"	'the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applic	able:	2365 Pine Tree	Dr. Apt. 613	
Principal office address MUST BE A STREE	ET ADDRESS)	Miami Beach, FL	33140	
		<u> </u>		
Enter new mailing address, if applicable:		2365 Pine Tree I	Dr. Apt. 613	
Mailing address MAY BE A POST OFFICE BOX)		Miami Beach, FL 33140		
3. If amending the registered agent and/oregistered agent and/or the new registered of	-		records, enter	the name of the new
Name of New Registered Agent:	Osmin Herr	nandez		···
New Registered Office Address:	2365 Pine 1	ree Dr. Apt. 613		
			Florida street ada	tress
	M	iami Beach	, Florida	33140
		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

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 = Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
			— =
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter ch	hange(s) here: (Attach additional sheets, if necessary.	)
		A HASSE	TH MAY -9
	May 4th	2011 . Each	
	Signature of a me	Hernandez/ mber or authorized representative of a member	
		Osmin Hernandez	

Page 2 of 2

Filing Fee: \$25.00