L11000039836

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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(Do	cument Number))
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C. LEWIS MAR 2 7 2013 **EXAMINER**

COVER LETTER

TO:

Registration Sections
Division of Corporations

HuB Studios 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:

Assunta Swier

Name of Person

HUB Strlios LLC

Firm/Company

1990 Main Street PH19

Address

Sarasota, FL 34236

City/State and Zip Code

assuntaswier@gmail.com

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

For further information concerning this matter, please call:

Assunta Swier

at (941) 350-1158

Name of Person

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)

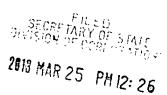
□\$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

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



HUB STUDIOS 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 Li Florida document number L11000039836	ability Company were filed	on 04/01/2011	_ and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability compa	any here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability	Company," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
B. If amending the registered agent and/or the new registered of		ss on our records, enter the	name of the new
Name of New Registered Agent:	1990 Main Street Pl	J10	
New Registered Office Address:	1990 Main Sueet Fr	Enter Florida street addres	ss
	Sarasota	, Florida 342	36
	City	, riomaa <u>ote</u>	Zip Code
New Registered Agent's Signature, if changing I	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 = Manager MGRM = Managing Member 2818 HAR 25 PH 12: 26 **Title Name Address Type of Action** MGR **HuB Incubator LLC** 1990 Main Street PH19 Sarasota, FL 34236 Remove Joey Panek 1680 Fruitville Road MGR Sarasota, FL 34236 Remove 1680 Fruitville Road Lucas Colavecchio MGR Sarasota, FL 34236 Richard Swier 1990 Main Street PH19 MGR Add Sarasota, FL 34236 Remove Remove

11 9111¢	ending any other information, enter change(s) here: (Attach additional she	JUNE TARY OF .
-		2613 MAR 25 PH 12
-		
ed	Mach 13 . 2018	
	Signature of a member or authorized representative of a m Richard Swier	ember
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Filing Fee: \$25.00