L11000041840

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(Ad	dress)	
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(Cit	y/State/Zip/Phoni	e #)
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AUG - 9 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Electromotive Studios LLC	
Name of Limited Liability Company	
ı	12
	Section 1
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	8
	第6 2
Luis Giron	700
Luis Giron Name of Person	9.7
Electromotive Studios LLC Firm/Company	Elm
Firm/Company	
16624 Hemingway Drive	
Address	
Weston, FL 33326 City/State and Zip Code	
City/State and Zip Code	
null-set design a gmail · eam E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Luis Giron at (954) 547 1434	_
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\square\$\$\$\$\square\$	tatus &

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

Electromotive Stud	ios, LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w Florida document number L11000041840	ere filed on 04/07/2011	and assigned
This amendment is submitted to amend the following:	_	TAECE TAECE
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and end with the words "Limited "L.L.C."	1 Liability Company," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:		2 F
(Principal office address MUST BE A STREET ADDRESS)		7
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
	, Florida	Zip Code
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I further a	eree to comply with

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 amenting the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	<u>Gabriella Cassella</u>	16624 Hemingway Dr. Weston	1,FL (Add)
		33326	Remove
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			Add
			Remove

amending any other informa	ation, enter change(s) here: (Attach additional sheets, if	necessary.)
3/6/13	. 2013	
	gnature of a member or authorized representative of a member	
318		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

