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SECRETARY DE SIMIL

JAN 15 2013 BRUCE

COVER LETTER

TO: Registration Division o	on Section f Corporations		
Striker SUBJECT:	through Productions, LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.		
Please return all cor	respondence concerning this matter to the following:		
	Melanie Dean		
	Name of Person		
	Strikethrough Productions, LLC		
	Firm/Company	•	
	5860 82nd Terrace N		
	Address	•	
	Pinellas Park, FL 33781		
	City/State and Zip Code	•	
	mrdean@tampabay.rr.com		
	E-mail address: (to be used for future annual report notification)		
For further informat	tion concerning this matter, please call:	2016 SEC	
Melanie Dean	727 480-6357 at ()		
N	ame of Person Area Code Daytime Telephone Number	200 A	
Enclosed is a check	for the following amount:	SIAS == (フ
■ \$25.00 Filing F	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified	te of Status &	

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

ty Company as it now appears on our Limited Liability Company)	records.)
Company were filed on $\frac{06/02/2011}{1}$	and assigned
<u>_</u> .	
ited liability company here:	
ited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
5860 82nd Terrace N	
Pinellas Park, FL 33781	
5860 82nd Terrace N Pinellas Park, FL 33781 tered office address on our re	ASSES OF A
ress here:	RIDA
Enter Florida street	t address
2000 1000 1000 1000	
City	, Florida
i i	ted liability company here: ited Liability Company," the designation 5860 82nd Terrace N Pinellas Park, FL 33781 5860 82nd Terrace N Pinellas Park, FL 33781 tered office address on our ress here: Enter Florida street

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 Changing Registered Agent, Signature of New Registered Agent

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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estive date if other than the date of filings	(optional)
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of	filing or more than 90 days after filing.) Pursuant to 605.
e: If the date inserted in this block does not meet the applicable statu ument's effective date on the Department of State's records.	tory filing requirements, this date will not be liste
different series of the Department of State Steedids.	
record specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m. on the earlie
he 90th day after the record is filed.	
ed January 11 , 2016	
/ ,	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00