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S. WARREN AUG 0 7 2017

COVER LETTER

	egistration Se vision of Cor			
SUBJECT	Di	verse Media Ent	ertainment, LLC	_
			ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	! !
Please retur	n all correspo	ndence concerning this matter	to the following:	ļ
		<u>Oscar</u> K	Name of Person	
			Name of Person	
			Media Entertainment Firm/Company	7+, 1.1.()
		912 Puma	Trail	1
			Address	
		Winter Syn	ngs, FL 32708 City/State and Zip Code	' '
		oscarmfal@gmail. com	City/state and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For further	information c	oncerning this matter, please ca	all:	
Oscar Rosa	ı			- 2816
	Name o	f Person	at (<u>UST</u>) 285- Area Code Daytin	ne Telephone Number
				1
Enclosed is	a check for th	ne following amount:		
□ \$ 25.00	Filing Fee	S\$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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Diversity Films	, LLC	<u>. </u>
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our records Liability Company)	<u>(.</u>)
The Articles of Organization for this Limited Liability Company Florida document numberLI 000684780	were filed on July 25, 2	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Diverse Media Entertainment The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	912 Puma Trail	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	912 Puma Trail Winter Springs, Fl	80566
		
Enter new mailing address, if applicable:	912 Puma Trail Winter Springs, FI	
(Mailing address MAY BE A POST OFFICE BOX)	Winter Springs, 1-1	<u> 35⇒0%</u>
	<u></u>	i .
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·	, 13,7 5010
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I fur performance of my duties, an provided for in Chapter 605, I	d I am familiar with and F.S. Or, if this document is
If Chair	nging Registered Agent, Signature o	f New Registered Agent
Page	1 of 3	3: 15 - [A] : - [A] :

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u> Citle</u>	<u>Name</u>	<u>Address</u>	Type of Action
		· · · · · · · · · · · · · · · · · · ·	
			Remove
			Change
			Add
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effective date, if other than the date of filing:	(optional)
e: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	uirements, this date will not be listed as
record specifies a delayed effective date, but not an effective time, he 90th day after the record is filed.	at 12:01 a.m. on the earlier of
ed July 30 , 2017.	
	12H 3
Signature of a member or authorized representative of a member of of a mem	nember 1
USCAR ROSA Typed or printed name of signee	-3 P
Typed or printed name of signee	(,', ,
	3: 1: ORID
Page 3 of 3	₹ : 5

Filing Fee: \$25.00