L11000090790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

06/24/19--01025--051   **25.00

S TALLENT

JUL 09 2019

2019 JUN 24   PM 3: 07

FILED
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: **Registration Section**
        Division of Corporations

Premier Models and Talent LLC

SUBJECT: _____

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:

Maria Pulliam

_____

Name of Person

Premier-Talent LLC

_____

Firm/Company

10752 Deerwood Park Blvd South Waterview II Suite 100

_____

Address

Jacksonville, FL 32256

_____

City/State and Zip Code

maria@premier-talent.org   ✓

_____

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

For further information concerning this matter, please call:

Maria Pulliam   904   373-8070

_____ at (_____) _____
Name of Person   Area Code   Daytime Telephone Number

Enclosed is a check for the following amount:

■ $25.00 Filing Fee   ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                          Certificate of Status   Certified Copy   Certificate of Status &
                                                      (additional copy is enclosed)   Certified Copy
                                                                                (additional copy is enclosed)

MAILING ADDRESS: **STREET/COURIER ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                      Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
OF

Premier Models and Talent, 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 Liability Company were filed on 08/08/2011 _____ and assi

Florida document number L11000090790 _____.

This amendment is submitted to amend the following:

A. If amending name, **enter the new name of the limited liability company here:**

Premier-Talent LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2019 JUN 24 PM 3:07

B. If amending the registered agent and/or registered office address on our records, **enter the name (** **registered agent and/or the new registered office address here:**

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____

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 compl provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docu being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liabilit company has been notified in writing of this change.

_____

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

MGR =   Manager
AMBR = Authorized Member

Title	Name	Address	Type of A
_____	_____	_____	☐ Add
		_____	☐ Remo
		_____	☐ Chang
_____	_____	_____	☐ Add
		_____	☐ Remo
		_____	☐ Chang
_____	_____	_____	☐ Add
		_____	☐ Remov
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remov
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

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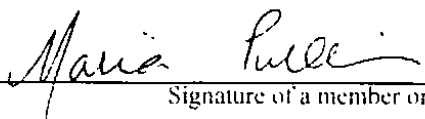
_____

_____

_____

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_____

_____

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an 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 605.020
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
(b)   The 90th day after the record is filed.

Dated   June 19   2019
_____ . _____ .

_____
                Signature of a member or authorized representative of a member

            Maria Pulliam

_____
                Typed or printed name of signee

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Filing Fee: $25.00