# 11100009951

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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

` División of C	•		
SUBJECT: Bob Mete	elus Studios, LLC		
	Name of Limited	d Liability Company	
The anglocod Articles	of Amendment and fee(s) are submi	ttad for filing	
		•	
Please return all corres	spondence concerning this matter to	the following:	
	Bob Metelus		
		Name of Person	<del></del>
	Bob Metelus Studios, LLC		
	<del></del>	Firm/Company	
	20631 NW 7th Ct		
		Address	
	Miami, Florida 33169		
		City/State and Zip Code	<del></del>
	bobmimages@gmail.com		
	E-mail address: (to b	be used for future annual report notif	ication)
For further information	n concerning this matter, please call:		
Lahteefah Parramore, C	СРА	727 457-2625	
Name	e of Person	at () Area Code Daytime	e 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

TO:

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

Bob Metelus Studios, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears o <u>n our records</u> Liability Company)	<u>.</u> )
The Articles of Organization for this Limited Liability Company Florida document number 111000094951	were filed on August 18, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	nility company here:	
Bob Metelus Images, LLC		
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:		
Principal office address MUST BE A STREET ADDRESS)		
		^ <u>{</u>
		. 50
Enter new mailing address, if applicable:	20533 Biscayne Blvd	~ C:
Mailing address MAY BE A POST OFFICE BOX)	Suite 4-787	
Maung dadress MAT BE A FOST OFFICE BOX)	Aventura, FL 33180	<u> </u>
3. If amending the registered agent and/or registered o registered agent and/or the new registered office address her  Name of New Registered Agent:		enter the name of the
New Registered Office Address:		
rew registered office readiess.	Enter Florida street address	
	, Flo	rida
	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 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, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
		<del></del>	Add
			Remove
			Change
			□ Add
			☐ Remove
			☐ Change
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			_ ☐ Remove
			Change
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		<del></del>	
			Remove
			☐ Change

D. If amending any other inf	ormation, enter change(s) here: (Attach additio	nal sheets, if necessary.)
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Note: If the date inserted in	an the date of filing:  ate must be specific and cannot be prior to date of filing or mothis block does not meet the applicable statutory filing the Department of State's records.	(optional)  fore than 90 days after filing.) Pursuant to 605,0207 (3 M requirements, this date will not be listed as the
If the record specifies a de (b) The 90th day after th	layed effective date, but not an effective tile record is filed.	me, at 12:01 a.m. on the earlier of:
Dated January 24	2018	* - C7
Dated	~ ~ ~ ~ · ~ · · · · · · · · · · · · · ·	
	A Meteles	, <u>C</u>
_	Signature of a member or authorized representative of	of a member
I	Bob Metelus	Ξ

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Typed or printed name of signee

Filing Fee: \$25.00