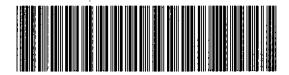
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C. LEWIS

SEP 2 3 2011

EXAMINER

COVER LETTER

O: Registration Section Division of Corporations						
UBJECT: WORKFLOW FILMS LLC						
(Name of Limited Liability Company)						
he enclosed Articles of Amendment and fee(s) are submitted for filing.						
lease return all correspondence concerning this matter to the following:						
Barbara Dang						
(Name of Person)						
Legalzoom.com, Inc.						
(Firm/Company)						
100 W. Broadway Suite 100						
(Address)						
Glendale, CA 91210						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Barbara Dang at (323) 962-8600 (Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) **Certified Copy (additional copy is enclosed) **Certified Copy (additional copy is enclosed)						

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

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Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2011 SEP 22 AM 10: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

WORKFLOW FILMS LLC		
(Name of the Limited	d Liability Company as it now appears of A Florida Limited Liability Company)	on our records.)
(,	vi iorida Emined Elability Company)	
The Articles of Organization for this Limited L	iability Company were filed on 08/19	<u>//2011</u> and assigned
Florida document number <u>L11000095465</u>		
This amendment is submitted to amend the foll	lowing:	
A. If amending name, enter the new name o	of the limited liability company here:	
WORK FLAIL	FILMS IIC	•
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Company	"the designation "LLC" or the abbreviation
B. If amending the registered agent and/ registered agent and/or the new registered or		records, enter the name of the new
Name of New Registered Agent:	JAN CHEIST 16604 Solunding	-7
-	11-1-01 Solvanio	o SILORES VA
New Registered Office Address:	(Enk	r Florida street address)
	ODESSA	, Florida <u>33</u> \$56
	(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 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 Rogistered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

	= Manager 1 = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	_		Add Remove
			Add Remove
	<u> </u>		Add Remove
	 		Add Remove
			Add Remove
			Add Remove
D. If a	nending any other information, enter change Article II The street address of the pri		sary.)
	14341 Chandler Blvd #9 Sherman O		2011 SEP
	The mailing address shall be:	······································	F 1 SECRE
	14341 Chandler Blvd #9 Sherman O	aks, California 91401	22 ARY OF
Dated _	9/20 . 2011	·	AH 10: 49 OF STATE E. FILORIDA
	Signature of a member	or authorized representative of a member	
	lan Christy	or printed name of signee	
	1 vbed (or primed hame of signee	

Page 2 of 2

Filing Fee: \$25.00