

LI 000135811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

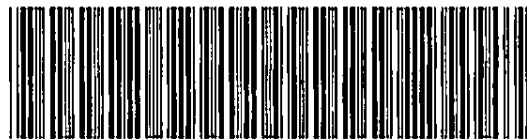
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2022 JAN -3 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FL 323

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SCOOTER MAGRUDER PRODUCTIONS LLC.

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:

NEQUOSHA ANDERSON

Name of Person

ANDERSON LAW FIRM PLLC

Firm/Company

581 N PARK AVE STE 2355

Address

APOPKA FL 32712

City/State and Zip Code

OFFICE@ANDERSONLAWFL.COM

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

For further information concerning this matter, please call:

NEQUOSHA ANDERSON

407 801-8000
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 &
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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 JAN -3 PM 1:29

SCOOTER MAGRUDER PRODUCTIONS LLC.

(Name of the Limited Liability Company as it now appears on our records,
(A Florida Limited Liability Company))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/01/2011 and assigned
Florida document number L11000135811.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability 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)

10450 TURKEY LAKE RD

SUITE 692049

ORLANDO, FL 32819

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 692049

ORLANDO, FL 32869

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

Name of New Registered Agent:

ANDERSON LAW FIRM PLLC

New Registered Office Address:

581 N PARK AVE STE 2355

Enter Florida street address

APOPKA

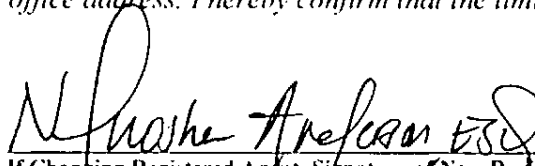
City

Florida 32712

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

[illegible]

(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 605.0207 (3)(b)

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

Dated December 22, 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee