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COVER LETTER

TO:

Registration Section **Division of Corporations**

MIA ANIMATION, 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:

Mauricio Ferrazza

Name of Person

MIA ANIMATION, LLC

Firm/Company

800 Lenox Avenue #3

Address

Miami Beach, FL 33139

City/State and Zip Code

mauricioferrazza@gmail.com

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

For further information concerning this matter, please call:

Mauricio Ferrazza

786 208-5964

Name of Person

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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIA ANIMATION, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on c Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability (Florida document number L12000002886	Company were filed on <u>01/06/2</u> 	2012 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		ecords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
		orida street address
	City	, Florida 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u> MGR	Name Debra Pierce	Address 75 Gulfstream Road #112	Type of Action
		Dania, FL 33004	Add Remove
			Add Remove
	-		Add Remove

Mauricio Ferraz	za - 51%
Debra Pierce -	49%
April 17th	2013
	L. Cyci.
Mauricio Ferra	<i></i>
	Typed or printed name of signee

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Filing Fee: \$25.00