# L1200069285

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#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

# TROPIC PICTURES 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:

**GEORGE FULLER** 

Name of Person

TROPIC PICTURES LLC

Firm/Company

7020 GRIFFIN RD

Address

**BROOKSVILLE, FL 34601** 

City/State and Zip Code

BETTERBUSINESSLLC@GMAIL.COM

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

For further information concerning this matter, please call:

**GEORGE FULLER** 

<sub>\*/</sub>954\298-874*′* 

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/COURIER ADDRESS:

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

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 26, 2013

GEORGE FULLER 7020 GRIFFIN RD BROOKSVILLE, FL 34601

SUBJECT: TROPIC PICTURES, LLC

Ref. Number: L12000069285

We have received your document for TROPIC PICTURES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been alied and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as for it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is J33193 "TROPICTURES, INC.".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 613A00020252

www.sunbiz.org

Division of Corporations - P.O. ROY 6327 Tallahassaa Florida 32314

### TROPICTURES, LLC

7020 GRIFFIN RD **BROOKSVILLE, FL 34601** 

Date: September 6, 2013

To: Florida Department of State

**Division of Corporations** 

Tropic Pictures, LLC Ref #L12000069285 Re:

We have received your letter denying the name change to Tropictures due to the name already being taken or similar to the Tropictures Inc in your registry. However, this was our old company and we have since converted to an LLC but would like our original name due the investment of stationary, marketing, etc, but as an LLC and not an INC.

After calling we had been informed to enclose a letter such as this explaining the situation and that we (the original, Tropicures, Inc) release the name for this purpose.

Please let me know if there is anything else you need to make this change.

George Fuller - MGMR

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## TROPIC PICTURES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Fioria Limi	ted Liability Company)	
The Articles of Organization for this Limited Liability Comp.  Florida document number <u>L12000069285</u>	pany were filed on 5/23/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
TROPICTURES LLC		<u>.</u>
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," the designation ".	LLC" or the abbreviation
Enter new principal offices address, if applicable:		<b></b>
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	20 2
		ATHE
		\$ <b>6</b>
Enter new mailing address, if applicable:		me - 1
(Mailing address MAY BE A POST OFFICE BOX)		Es f
		岩点 <u>3</u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street add	dress
	, 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 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 Type of Action <u>Title</u> <u>Name</u> **Address** Remove Remove Remove Remove Remove

If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
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AUGUST 19	, 2013
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_	a member or authorized representative of a member
GEORGE FULLER	
	Typed or printed name of signee
	D 0 00

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Filing Fee: \$25.00

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SECRETARY OF STATE
SECRETARY OF STATE