da Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000272411 3)))



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Division of Corporations

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Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : 120120000052

: (305)591-9180

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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C. LEWIS DEC 1 7 2013

EXAMINER

p.02



December 13, 2013

FLORIDA DEPARTMENT OF STATE Division of Corporations

ONY PRODUCTIONS LLC 11251 NW 20TH ST STE 106 MIAMI, FL 33172US

SUBJECT: ONY PRODUCTIONS LLC

REF: L12000130206

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name and the document number do not match. Your document number should be L12000130206. Please correct your document accordingly.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II FAX Aud. #: H13000272411 Letter Number: 913A00028368

Jelen Accounting Services Inc

305-591-916**7**

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ONY PRODUCTIONS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 10/12/2012 Florida document number L1200013020 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 end with 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent and agree to adt 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Page 1 of 3

H13000724113

If amending the Managers or Managing Members on our records, enter the fitte, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MCRM = Managing Member Title Name Address Type of Action OTHNIUSKA CEDENO **MGRM** 1200 BRICKELL BAY DRIVE **APT 2521 ✓** Remove MIAMI, FL 33131

Page 2 of 3

D. If amend	ing any other information, enter change(s) here: (Auach additional sheets, if necessary.)			
		SECRE TALLA	13 DEC	Þ
		HASSE	เม	APPRO ANI FILE
Dated DE	CEMBER 4TH , 2013 .		肼 9: 23	
	Signature of a member or authorized representative of a member YESENIA FEGAN Typed of printed name of a game	* ***		

Page 3 of 3