2/2000/31404

(R	equestor's Name)
(A	ddress)
. (A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

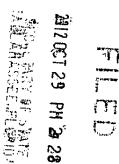
OCT 31 2012

EXAMINER

Office Use Only



300241173733



10/29/12--01036--010 **30.00

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Digital 8 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:				
Nick Floyd				
Name of reson				
Digital & Productions, LLC				
3748 Saint Lucie Ct.				
Winter Spring 5 FL. 32708 City/State and Zip Code				
City/State and Zip Code digital 8 production 5 a gmail. Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (850) 896-0252 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Digital & Production	ons, LLC.	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)
(
The Articles of Organization for this Limited Liability Company	were filed on <u>OCtober 16</u>	, 2012 and assigned
Florida document number <u>L12000131404</u> .		36-45 N
·		
This amendment is submitted to amend the following:		
A 16	! 	
A. If amending name, enter the new name of the limited liabi	my company nere:	
	NA	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation	on "LLC" or the abbreviation
	A/ /n	•
Enter new principal offices address, if applicable:	/V / <i>F</i>	
(Principal office address MUST BE A STREET ADDRESS)		
))	
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	11,	
B. If amending the registered agent and/or registered off		er the name of the new
registered agent and/or the new registered office address here	:	
	10	
Name of New Registered Agent:	NIA	
New Registered Office Address:		
ivew registered Office Address.	Enter Florida street address	
	, 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 Changing Registered 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 or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Title **Address Type of Action** <u>Name</u> Nick Floyd 3748 Saint Lucie Ct. ☐ Add ☐ Remove ☐ Add Remove □Add Remove and ∏-∡dd Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Change Erin Floyd Dated October 2012. Signature of a member or authorized representative of a member Typed of printed name of signee

Page 2 of 2

Filing Fee: \$25.00