

LC3000000344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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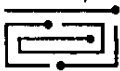
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16 NOV -8 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

NOV 9 2016



CONNER, HUBBARD & COMPANY, LLC
Certified Public Accountants

Taxation, Accounting, Pension Planning, and Business Counseling

October 28, 2016

Florida Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Worldwide Production Company LLC
Document Number: L13000000344

Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment for Worldwide Production Company, LLC.

Also enclosed please find our firm's check in the amount of \$55.00, representing the filing fee for the Articles of Amendment along with a certified copy of same.

Please call me if you have questions, or need additional information.

Sincerely,
CONNER, HUBBARD & COMPANY, LLC

Steven W. Conner
Certified Public Accountant

Enclosures
SWC/jh
cc: Robert Simon

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TALLAHASSEE, FLORIDA

Q:\Word\U, V, W, X, Y, and Z files\WOR6000 (Worldwide Production Co LLC)\2.100 Ltr to Sec. of State enclosing Articles of Amendment and filing fee.doc

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Worldwide Production Company, 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:

Steven W. Conner, Registered Agent

Name of Person

Conner Hubbard & Company, LLC

Firm/Company

1060 Park Avenue

Address

Orange Park, FL 32073

City/State and Zip Code

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

For further information concerning this matter, please call:

Steven W. Conner

904

278-1040

at ()

Name of Person

Area Code

Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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**

Worldwide Production Company, 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 01/02/2013 and assigned
Florida document number L13000000344.

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)

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

Florida

City

Zip Code

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SECRETARY OF STATE

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Susan M. Simon	9905 Old St. Augustine Road	<input type="checkbox"/> Add
		Suite 105	<input checked="" type="checkbox"/> Remove
		Jacksonville, FL 32257	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

SECRET
TALLAH

(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)

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SECRETARY OF THE
TALLAHASSEE, FLORIDA
Pursuant to 605.0207 (3)(b)
I am not listed as the

Dated 10-18, 2016.

Signature of a member or authorized representative of a member

Typed or printed name of signee