

L13000020105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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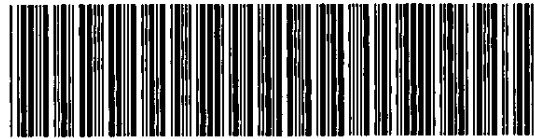
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. BRUCE
APR 19 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SPROUT STUDIOS 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:

TRAVIS LATIMER

Name of Person

SPROUT STUDIOS LLC

Firm/Company

2170 MAIN STREET, SUITE 203

Address

SARASOTA FL 34237

City/State and Zip Code

info@4dsprouts.com

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

For further information concerning this matter, please call:

TRAVIS LATIMER

770 380-7594

Name of Person

at ()

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

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TALLAHASSEE, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(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 2/07/2013 and assigned
Florida document number L13000020105.

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)

2170 MAIN STREET

SUITE 203

SARASOTA, FL 34237

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2170 MAIN STREET

SUITE 203

SARASOTA, FL 34237

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:

TRAVIS LATIMER

New Registered Office Address:

2170 MAIN STREET, SUITE 203

Enter Florida street address

SARASOTA

, Florida 34237

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 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	ANDREA LATIMER	7465 PALMER GLEN CIRCLE	☐ Add
		SARASOTA FL 34240	☒ Remove
			☐ Change
MGR	TRAVIS LATIMER	2170 MAIN STREET	☐ Add
		SUITE 203	☐ Remove
		SARASOTA FL 34237	☒ Change
			☐ Add
			☐ Remove
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TALLAHASSEE, FLORIDA

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated APRIL 11, 2017



Signature of a member or authorized representative of a member

TRAVIS LATIMER

Typed or printed name of signee