

L13000028832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

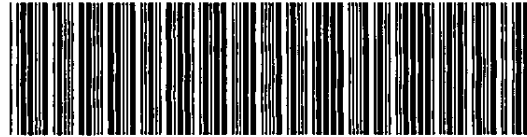
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 JUN 28 PM 4:16
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2013

BRITTANY GADT
IBD PRODUCTIONS LLC
22159 SOLIEL CIRCLE EAST
BOCA RATON, FL 33433

SUBJECT: IBD PRODUCTIONS LLC
Ref. Number: L13000028832

We have received your document for IBD PRODUCTIONS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because this company is an LLC it cannot use the corporation amendment form.

Please complete, sign, and return the enclosed LLC amendment FORM.

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.

Buck Kohr
Regulatory Specialist II

Letter Number: 813A00015358

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IBD Productions, LLC

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brittany Gadt

Name of Contact Person

IBD Productions

Firm/ Company

22159 Soliel Cir E

Address

Boca Raton, FL 33433

City/ State and Zip Code

Bbgadt2011@gmail.com

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

For further information concerning this matter, please call:

Brittany Gadt

Name of Contact Person

at (561) 504-8398

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IBD Productions

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:

Brittany Gadt

Name of Person

IBD Productions

Firm/Company

22159 Soliel Cir E

Address

Boca Raton, FL 33433

City/State and Zip Code

Brittany@IBDproductions.com

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

For further information concerning this matter, please call:

Brittany Gadt

Name of Person

at (561) 504-8398

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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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13 JUN 28 PM 4:17
TALLAHASSEE, FLORIDA

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

IBD PRODUCTIONS

(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 2/25/2013 and assigned
Florida document number L13000028832.

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

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

MGR = Manager
MGRM = Managing Member

Page 2 of 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated JUNE 26, 2013.

B. gadt

Signature of a member or authorized representative of a member

Brittany Gadt

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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