

L13000057316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

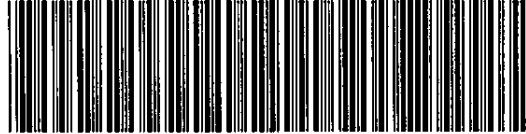
(Document Number)

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TALLAHASSEE, FLORIDA

JUL 29 2015

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUL 28 PM 2: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 10, 2015

JUSTIN SHANER
JLS AGENCY
255 ALHAMBRA CIRCLE #1160
CORAL GABLES, FL 33134

SUBJECT: BEEF FILM LLC
Ref. Number: L13000057316

We have received your document for BEEF FILM LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 415A00014505

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15 JUL -9 AM 10:21
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beef Film, 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:

Justin Shaner

Name of Person

JLS Agency,

Firm/Company

255 Alhambra Circle #1160

Address

Coral Gables, FL 33134

City/State and Zip Code

Jshaner@sobebrooke.com

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

For further information concerning this matter, please call:

Leslie Zigel

Name of Person

at (305) 604-9944

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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15 JUL -9 AM 10:21
TALLAHASSEE, FL 32301
SECRETARY OF STATE
TALLAHASSEE, FL 32301

**TO
ARTICLES OF ORGANIZATION
OF**

Beef Film, 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 _____ and assigned
Florida document number L1300005731b.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WALK OF LIFE PRODUCTIONS, LLC

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:

Leslie Jose Zigel

New Registered Office Address:

4500 Biscayne Blvd, #201

Enter Florida street address

miami

City

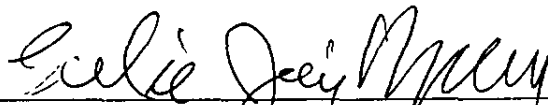
Florida

33137

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
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CIVIL RIGHTS DIVISION

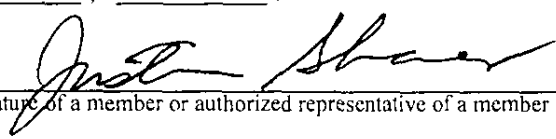
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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)
(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)
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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated May 11, 2015



Signature of a member or authorized representative of a member

Justin L. Shaner

Typed or printed name of signee