

L13000098262

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 FEB -2 PM 12:35

FEB 03 2017
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: STARSTRUCK PRODUCTIONS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL FERNANDEZ
Name of Person
STARSTRUCK PRODUCTIONS LLC
Firm/Company
3400 HAVENDALE BLVD NW
Address
WINTER HAVEN FL 33880
City/State and Zip Code
SKYLINEAUTOSALESLLC@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL FERNANDEZ 407 922-6064
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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
2601 Executive Center Circle
Tallahassee, FL 32301

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

STARSTRUCK PRODUCTIONS 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 07/11/2013 and assigned
Florida document number L13000098262

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 "LLC."

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)

3400 HAVENDALE BLVD NW

WINTER HAVEN FL 33880

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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:

MICHAEL FERNANDEZ

New Registered Office Address:

3400 HAVENDALE BLVD NW

Enter Florida street address

WINTER HAVEN

Florida 33880

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>
MGR	MELANIE PRADOS	302 DUNDEE RD	<input type="checkbox"/> Add
		DUNDEE FL 33838	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL FERNANDEZ	302 DUNDEE RD	<input checked="" type="checkbox"/> Add
		DUNDEE FL 33838	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

Melanie Perdas

Signature of a member or authorized representative of a member

Typed or printed name of signee

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