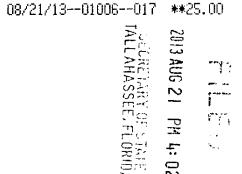
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(Re	questor's Name)		
(Ad	dress)		
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PICK-UP	☐ WAIT	MAIL	
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B. BOSTICK
AUG 2 2 2013
EXAMINER

COVER LETTER

TO: Registration Section of Corp.			
SUBJECT: <u>BUY</u>	nard Cinem Name of Limite	atic Photogran	phy
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	Alana	6 Uinard Name of Person	
	- Guinar	d Cinematic	Protography
	642 James	town Blvd #23	05
		Prings, FL 32 City/State and Zip Code	
	E-mail address (to	be used for future annual report notificati	2013 AUG 21 SECRETARIASS
For further information co	ncerning this matter, please ca	all:	21 ASSET
Hana Name of	<u>Guinard</u> Person	at (<u>954) 646 563</u> Area Code & Daytime Te	PA L: 02
Enclosed is a check for the	e 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

(Name of the Limited Liability (A Florida	nematic	Photography,	LLC	
The Articles of Organization for this Limited Liability of Florida document number	Company were filed o		and	assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability compa	ny here:		
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability	Company," the designation '	'LLC" or th	he abbreviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)	FAL	20 <u>1</u>	
		A	CR. A	
		A.S.S	62 2	F 74 .
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		TI CONTRACTOR OF THE CONTRACTO	=	<u> </u>
		7. 	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ss on our records, <u>enter</u>	the nam	e of the new
Name of New Registered Agent:				
New Registered Office Address:				
Enter Florida street address				
	, Florida			
	City		Zip C	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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

.MGR = Manager

MGRM = Managing Member Type of Action Title Address Name Miguel buinard 682 Jamestown Blvd #2305 Add MGRM Altamonte Springs, FL 327/4 Add Remove ORID: ÷ Remove Remove Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)		
	· · ·		
Dated August 19, 2013.			
Alana Gunaul Signature of a member or authorized representative of a member			
Alana buinach			
Typed or printed name of signee			
Page 3 of 3			
Filing Fee: \$25.00	SECKETARY TALLAHASSI	2013 AUG 21	
•	Y OF SIVI	PK ኒ፡ 02	in
	RID/	: 02	
