Electronic Filing Cover Sheet

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(((H130002773863)))



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To:

Division of Corporations Fax Number : (850)617-6383

From:

: LEGALZOOM.COM INC. Account Name Account Number : I20010000062

: (323)962-8600 : (323)962-3889 Phone Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRIGHT MINDS FILM FESTIVA L.L.C.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: BRIGHT	MINDS FILM FESTIVA	L.L.C.	
	(Name of Limit	ed Liability Company)	
The enclosed Articles of	Amendment and fec(s) are subn	nitted for filing.	
Please return all corresp	ondence concerning this matter t	o the following:	
			2813
	Imelda Vasquez		三
		(Name of Person)	
	Legalzoom.com, Inc.		
		(Firm/Company)	₩ N
	100 W. Broadway Sui	ite 100	<u></u>
		(Address)	
	Glendale, CA 91210		
		(City/State and Zip Code)	
For further information	concerning this matter, please ca	11:	
Imelda Vasquez		at (323) 962-8600 ext	
(Name	of Person)	(Area Code & Daytime T	'elephone Numb er)
Enclosed is a check for	he 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

BRIGHT MINDS FILM FESTIVA L.L.C.	
(Name of the Limited Liability Company as it now appears on our records	
(A Florida Limited Liability Company)	
	- XX型 の (
The Articles of Organization for this Limited Liability Company were filed on 11/4/2013	and assigned
Florida document number L13000154688	
1 total document number 1 10000 107000	
	20
This amendment is submitted to amend the following:	7.7
· ·	
A. If amending name, enter the new name of the limited liability company here:	
Bright Minds Film Festival, L.L.C.	
The new name must be distinguishable and end with the words "Limited Liability Company," the designati	on "LLC" or the abbreviation
"L.L.C."	
B. If amending the registered agent and/or registered office address on our records, en	tor the name of the new
registered agent and/or the new registered office address here:	ter tite name or the new
PARTIES OF HEALT BOOK OF THE HEALT CENTER OF HEALT BOOK CO.	
•	
•	
Name of New Registered Agent:	
New Registered Office Address:	at addrags)
	et address)
New Registered Office Address:	8
New Registered Office Address: (Enter Florida stree	
New Registered Office Address: (Enter Florida streeting), Florida	8
New Registered Office Address: (Enter Florida street) (City)	8
New Registered Office Address: (Enter Florida streeting), Florida	8
New Registered Office Address: (Enter Florida street) (City) New Registered Agent's Signature, if changing Registered Agent:	a(Zip Code)
New Registered Office Address: (Enter Florida street) (City) 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 furthe	a (Zip Code) r agree to comply with
New Registered Office Address: (Enter Florida street), Florida (City) 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 furthe the provisions of all statutes relative to the proper and complete performance of my duties, and	a (Zip Code) r agree to comply with and I am familiar with and
New Registered Office Address: (Enter Florida street) (City) 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 furthe the provisions of all statutes relative to the proper and complete performance of my duties, an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.	a (Zip Code) r agree to comply with and Or, if this document is
New Registered Office Address: (Enter Florida street) (City) 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 furthe the provisions of all statutes relative to the proper and complete performance of my duties, an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. being filed to merely reflect a change in the registered office address, I hereby confirm that the	a (Zip Code) r agree to comply with and Or, if this document is
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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

<u>Title</u>	<u>Name</u>	Address	Type of Action
	 		Add Remove
···			Add Remove
			Add [©]
			Add &
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
			_
Dated			
<u></u>	Signature of a meriber of	r aluthorized representative of a member	
_	Jo	ose Henriquez printed name of signee	···

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Filing Fee: \$25.00