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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

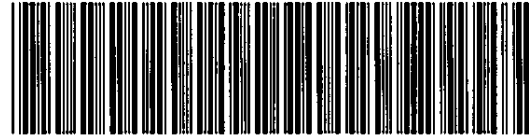
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 JAN 13 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. SCOTT

JAN 16 2014

EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

*\*NAME CHANGE only*

**SUBJECT: Satellite Films, 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:

**Kelly Hamm**  
Name of Person

**Satellite Films, LLC**  
Firm/Company

**502 Grand Preserve Cove**  
Address

**Bradenton, FL 34212**  
City/State and Zip Code

*Selenitefilms@gmail.com*  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Kelly Hamm** at **(941) 2014650**  
Name of Person Area Code Daytime Telephone Number

REGISTRATION SECTION  
TALLAHASSEE, FL 32301  
2014 JAN 13 PM 12:55

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

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

Satellite Films, 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 01/02/2014 and assigned Florida document number L14000003400.

This amendment is submitted to amend the following:

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

SELENITE FILMS, LLC

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:

NO CHANGE

(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 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

**When amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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2014 JAN 13 PM 12:55  
FALL BRASS COLLECTION

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

NO CHANGES OTHER THAN NAME CHANGE

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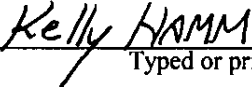
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated JANUARY 9, 2014



\_\_\_\_\_  
Signature of a member or authorized representative of a member



\_\_\_\_\_  
Typed or printed name of signee

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Filing Fee: \$25.00

2014 JAN 13 PM 12:55  
FALLMASSECT 10-11