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TALLAHASSEE, FLORIDA

7 Burch JUL 16 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Duck Box Productions, 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:

Patricia Rivadeneira

Name of Person

Duck Box Productions, LLC

Firm/Company

79 SW 12 ST Unit 3003

Address

Miami, fl. 33130

City/State and Zip Code

patricia@duckboxproductions.com

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

For further information concerning this matter, please call:

Patricia Rivadeneira

Name of Person

at **(786) 3515492**

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

Duck Box Productions, LLC

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If 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>
AMBR	Patricia Rivadeneira	79 SW 12 ST UNIT 3003 MIAMI, FL. 33130	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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ALLA HODEL FLORIDA
14 JUL 11 PM 1:55

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 3rd, 2014

Patricia Rivadeneira

Signature of a member or authorized representative of a member

Patricia Rivadeneira

Typed or printed name of signee

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Filing Fee: \$25.00

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