14000124571

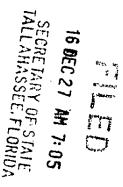
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Ashley Morales

Mixx Artistry, LLC Name Change

7965 NW 164 Terrace Miami Lakes, FL 33016

786.253.2773

COVER LETTER

	Registration Se Division of Cor			
CIDIC	Mixx Artis	<u>-</u>		
SUBJEC	T:		nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Ashley Morales		
			Name of Person	
		The Socialite Productions.	LLC	
		_	Firm/Company	
		7965 NW 164 Terrace		
			Address	
		Miami Lakes, FL 33016		
			City/State and Zip Code	
		ashley@thesocialiteproduct		
		E-mail address: (to be used for future annual report notifi	cation)
For furthe	r information c	oncerning this matter, please ca	all:	
Ashley M	Iorales		786 253-2773	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for tl	he following amount:		
□ \$25.0°	0 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

Mixx Artistry, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our record la Limited Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability (Florida document number L14000124571	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The Socialite Productions, LLC		
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC	or the appreciation L.L.C."
Enter new principal offices address, if applicable:		<u>≥</u>
Principal office address MUST BE A STREET ADD	RESS)	75 2 m
		The same
Enter new mailing address, if applicable:		02 0 0
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
3. If amending the registered agent and/or registered agent and/or the new registered office add		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	3
	, Flo	orida
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Change
			☐ Add
		- MATE	Remove
			□ Change
			□ Remove
			□ Change
			Add
			Remove
			Change
			Remove
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Planning company.	
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tive date, if other than the date of filing: Trective date is listed, the date must be specific and cannot be prior to date of filing	(optional)
1 If the date inserted in this block does not meet the applicable statutory nent's effective date on the Department of State's records.	y filing requirements, this date will not be list
ecord specifies a delayed effective date, but not an effect e 90th day after the record is filed.	ive time, at 12:01 a.m. on the earl
·//	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00