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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 23 2015

T. BROWN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BluStone Pictures, 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:

Jhonson Simeon

Name of Person

BluStone Pictures, LLC

Firm/Company

P.O. BOX 348776

Address

CORAL GABLES, FL 33234

City/State and Zip Code

jhonson.simeon@blustonep.com

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

For further information concerning this matter, please call:

Jhonson Simeon

at ( 305 ) 491-0219

Name of Person

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**(Name of the Limited Liability Company as it now appears on our records.)**  
(A Florida Limited Liability Company)

Page 1 of 3

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>
MGR	Georgette Seagrace	9249 Nelson Park Circle Apt 201	<input type="checkbox"/> Add
		Orlando, FL 32817	<input checked="" type="checkbox"/> Remove
MGR	Rashi Seagrace	9249 Nelson Park Circle Apt 201	<input type="checkbox"/> Add
		Orlando, FL 32817	<input checked="" type="checkbox"/> Remove
MGR	Wesley Simeon	9249 Nelson Park Circle Apt 201	<input type="checkbox"/> Add
		Orlando, FL 32817	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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**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 January 05 2015

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

Jhonson Simeon

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