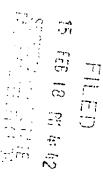
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COVER LETTER

	istration Se ision of Cor			
CUDIECT.	Active A	rts Video LLC		
SUBJECT:		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
Please return	all correspo	ndence concerning this matter	to the following:	
		Ronald R Lawler		
			Name of Person	
		Active Arts Video LL	.C	
			Firm/Company	50 3
		2008 NE 3rd Avenu	e #7	
			Address	
		Wilton Manors, Flori	da 33305	77
		rrlawler@hotmail.cor		100 E
For further in	nformation o	E-mail address: (oncerning this matter, please c	to be used for future annual report notificall:	ation)
Ronald R	Lawler		954 6616152	
	Name of	l Person		Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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)
	Registra Divisio	ING ADDRESS: ation Section n of Corporations	STREET/COURIE Registration Section Division of Corporat	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Active Arts Video LLC	sited Liability Company as it now appear	m an aug moonda
(Name of the Diff	nited Liability Company as it now appear (A Florida Limited Liability Company)	is on our records.
The Articles of Organization for this Limited Florida document number <u>L15000020841</u>	Liability Company were filed on Fe	ebruary 03,2015 and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company he	ere:
he new name must be distinguishable and end with th	e words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	至領 闭
		
inter new mailing address, if applicable:		· 00 171
<u>Mailing address MAY BE A POST OFFICI</u>	E BOX)	, <u>¥</u> U
) . 4.
B. If amending the registered agent and egistered agent and/or the new registered of		our records, enter the name of the
Name of New Registered Agent:	Ronald R Lawler	
New Registered Office Address:	2008 NE 3rd Avenue #7	
	Enter Floi	rida street address
	Wilton Manors	, Florida 33305
	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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

nald R Lawler	2008 NE 3rd Avenue #7 Wilton Manors FLooks 4, 375305	9 ■ Add
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effective date must be spec	han the date of filing: ific, cannot be prior to date of receipt or filed date and car by the Florida Department of State)	(optional) nnot be more than 90 days after
effective date must be spece date this document is filed	ific, cannot be prior to date of receipt or filed date and car by the Florida Department of State)	(optional) nnot be more than 90 days after
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Page 3 of 3

Filing Fee: \$25.00

