10/4/2019



Division of Corporations **Electronic Filing Cover Sheet**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **COZY PRODUCTIONS LLC**

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Corporate Filing Menu

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N CULLIG ...

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2019 OCT -4 PM 2: 37 SECRETARY OF STATE TALL/JIMSSEE, FL

Cazy Productions LLC			
(Name of the Limit	nd Liability Company A Florida Limited Lie	r na lt now aonears on our records ability Company)	~)
he Articles of Organization for this Limited Li Iorida document number <u>L15000042545</u>	ability Company v	vere filed on 03/09/2015	and assigned
nis amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	the limited liabil	ity company here:	
he new name must be distinguishable and contain the w	nots "Limited Liabili	ty Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applic			
Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u>			de la constant de la
 If amending the registered agent and registered agent and/or the new registered or 	lor registered of office address here	fice address on our record e:	is, enter the name of the
Name of New Registered Agent:	David T. Caser	tu	
New Registered Office Address:		Enter Florida street addre	est
		F	lorida

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 affice 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 = Manager AMBR = Authorized Member				
<u>Title</u>	Name	<u>Address</u>	Type of Action	
			Add	
			Remove	
			☐ Change	
			C Remove	
			Change	
			□ Remove	
			☐ Change	
			Remove	
			☐ Change	
			Remove	
			□ Change	
			D Add	
			☐ Remove	
			Change	

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		
		
		
		<u>_</u>
		
\ 		
		
		
		25 SEC
E. Effective of	dute, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put	
Note: If the	ive date is listed, the date must be specific and eximpt be prior to date of filing or more than 90 days after (ting.) Put the date inserted in this block does not meet the applicable statutory filing requirements, this date will the effective date on the Department of State's records.	not be listed esithe
If the record (b) The 90	rd specifies a delayed effective date, but not an effective time, at $12:01~\text{a.m.}$ on 0th day after the record is filed.	the earlier of:
Dated Oct	ctober 4 : 2019	
	Signature of a member of authorized representative of a member	
	David T. Caserta Typed or printed name of signes	

Page 3 of 3

Filing Fee: \$25.00