Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

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Account Name : BUSINESS FILINGS

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: (608)827-5501 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEIL FINANCIAL, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATIONAL AHASSEE, FLORIDA OF

	WEIL FINANCIAL, LLC	
(Name of the Limited Lis (A Flo	ibility Company as it now appears он ог orida Limited Liability Company)	ir records.)
The Articles of Organization for this Limited Liabil Florida document number L15000069537	ity Company were filed on 10/24/1997	and assigned
Florida document mapper	······································	
This amendment is submitted to amend the following	ığ:	
A. If amending name, enter the new name of the	limited liability company here:	
Weil Productions, LLC		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company." th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		cords, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	ida street address
_		. Florida
	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.

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MGR = Manager

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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>:

AMBR = At	ithorized Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			, —
			Reinove
			_
			Add
			Remove
			Add
			Remove
			Add
			Reniove
			Add
			
			Remove
			Ađd
			Remove

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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:
Dated
Signature of a member or authorized representative of a member
David Weil, Member
Typed or printed name of signee

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Filing Fee: \$25.00

