

L19000129567

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

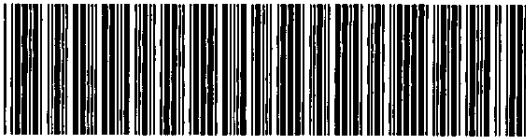
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** NewTinseltown, 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:

Barry B. Ansbacher

\_\_\_\_\_  
Name of Person

Ansbacher Law

\_\_\_\_\_  
Firm/Company

8818 Goodbys Executive Drives, Suite 100

\_\_\_\_\_  
Address

Jacksonville, FL 32217

\_\_\_\_\_  
City/State and Zip Code

dwc@ansbacher.net

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

For further information concerning this matter, please call:

Dianne Cosby or Barry Ansbacher

904 737-4600  
at ( )

\_\_\_\_\_  
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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

NewTinseltown, LLC

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

The Articles of Organization for this Limited Liability Company were filed on July 29, 2015 and assigned  
Florida document number L15000129567.

**FILED**  
**2015 SEP 30 P 1:06**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

c/o Ansbacher Law

8818 Goodbys Executive Drive, Suite 100

Jacksonville, FL 32217-4605

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:**

Ansbacher Law, P.A.

**New Registered Office Address:**

8818 Goodbys Executive Drives, Suite 100

*Enter Florida street address*

Jacksonville

, Florida 32217-4605

*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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Frank Darabi	6809 NW 48th Lane	<input type="checkbox"/> Add
		Gainesville, FL 32653	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Farzin Darabi	6809 NW 48th Lane	<input type="checkbox"/> Add
		Gainesville, FL 32653	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Frank A. Darabi as Trustee	6809 NW 48th Lane	<input checked="" type="checkbox"/> Add
	of the Frank A. Darabi Trust dated October 15, 1996	Gainesville, FL 32653	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Taraneh M. Darabi as Trustee	6809 NW 48th Lane	<input checked="" type="checkbox"/> Add
	of the Taraneh M. Darabi Trust dated October 15, 1996	Gainesville, FL 32653	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 ALACHUA COUNTY, FLORIDA

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

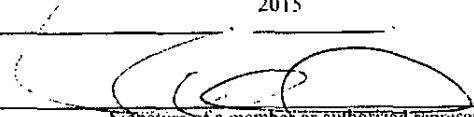
The company is a member-managed limited liability company.

ONLY Frank A. Darabi as Trustee of the Frank A. Darabi Trust dated October 15, 1996 or the successor trustee(s) of said trust has the authority to transfer real property held in the name of the limited liability company or to otherwise act on behalf of the limited liability company with respect to the disposition of any interest in said real property including, without limitation, the creation of a mortgage lien, granting of easements, or granting of a leasehold interest.

**E. Effective date, if other than the date of filing:**                     Date of Filing                     (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated September 28 2015

  
Signature of a member or authorized representative of a member

Frank A. Darabi

Typed or printed name of signer

**FILED**  
**2015 SEP 30 P 1:06**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**