

21600046415

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

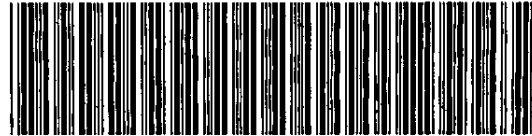
\_\_\_\_\_  
(Business Entity Name)

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

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

MAR 29 2016  
J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2016 MAR 29 PM 3:11  
TALLAHASSEE, FLORIDA

March 18, 2016

SEAN DIEDRICK  
14500 S.W. 88TH AVE. APT #158  
PALMETTO BAY, FL 33176

SUBJECT: YOUNGPOW PRODUCTIONS, LLC  
Ref. Number: L16000046418

We have received your document for YOUNGPOW PRODUCTIONS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 516A00005602

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** YOUNGPOW PRODUCTIONS, 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:

SEAN DIEDRICK

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

YOUNGPOW PRODUCTION, LLC

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

14500 S.W. 88TH AVE, APT#158

\_\_\_\_\_  
Address

PALMETTO BAY, FLORIDA, 33176

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

SEANDIEDRICK@YAHOO.COM

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

For further information concerning this matter, please call:

SEAN DIEDRICK

at ( 786 ) 5375852

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

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

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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

## Page 1 of 3

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	SEAN DANIEL DIEDRICK	14500 SW 88 AVE APT.#158	<input checked="" type="checkbox"/> Add
		PALMETTO BAY FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HAILEY LEONA DIEDRICK	14500 SW 88 AVE APT.#158	<input checked="" type="checkbox"/> Add
		PALMETTO BAY FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	EMILY JADE DIEDRICK	14500 SW 88 AVE APT.#158	<input checked="" type="checkbox"/> Add
		PALMETTO BAY FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALICIA LEONIA LEE DIEDRICK	14500 SW 88 AVE APT.#158	<input checked="" type="checkbox"/> Add
		PALMETTO BAY FL 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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TALLAHASSEE, FLORIDA

**E. Effective date, if other than the 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 MARCH 11TH, 2016

*Signature*  
Signature

SEAN DIEDRICK

Typed or printed name of signee