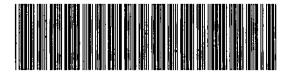
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SECRETARY OF STA

S. WARREN MAR 2 2 2018

COVER LETTER

	gistration Section vision of Corporations	
SUBJEC	FLA Productions LLC Name of Limited Liability Company	
The enclo	ed Articles of Amendment and fee(s) are submitted for filing.	
Please ret	n all correspondence concerning this matter to the following:	
	William Kabrick	
	FLA Productions LLC Firm/Company	
	2331 NW 13th St Address	
	Gaines Ville FL 32 609 City/State and Zip Code Flourish .creative & Gingil. Con E-mail address: (to be used for future annual report notification)	
For furthe	E-mail address: (to be used for future annual report notification) information concerning this matter, please call:	
	Name of Person at (974) Area Code Daytime Telephone Number	
Enclosed	a check for the following amount:	
□ \$25.0	Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) Solution Fee Scriffied Copy (additional copy is enclosed) Solution Fee Scriffied Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	itus &

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

FLA Productions LL	C
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) .iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L170000 8730</u> .	were filed on 01/11/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company "the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2331 NW 13th St Gainesville, FL 32609
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2331 NW 13th St Gaineville, FL 32609
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	die Bender
New Registered Office Address: 705	Enter Florida street address
Gaines	City Florida P3267
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publications of my position as registered agent as publication merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am Jamilian with a deportment of the provided for in Chapter 605, F.S. Or If this docume to

I 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 = M $AMBR = A$	anager uthorized Member	
<u>Title</u>	Name	Address Type of Action
MGL	Nathan, Jones	3006 SW 23rd Terr APT 9 11 Add
		Gainesville F/ 3260 8 Remove
		Change
MGB	Eddie, Bender	705 Queens food Add
		Gainesville, FL 32607 PRemove
		Change
		Remove
		Change
		Remove
		Change
		Add Add
		PA REOVE
		RECALL REMOVE ANSSET DE Change AND AND Permove
		Remove
		Change

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	Signature of	f a member or authorized re	presentative of a member	<u></u>	- m
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