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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DUANE MORRIS LLP Account Number : 119990000059

Phone : (305)960-2220

Fax Number : (305)397-2683

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

MAXVANFLEET6@GMAIL.COM Email Address:\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIXEDMAX PRODUCTIONS LLC

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T. CLINE EXAMINER

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

H18000293369

MIXEDMAX PRODUCTIONS LLC							
(Name of the Limite)	d Liabillty Compa A Florida Limited I	ny as it now appears on our re , ability Company)	cords.)				
The Articles of Organization for this Limited Lie Florida document number 1.17000018215  This amendment is submitted to amend the follows:	ability Company			and assi	gned		
A. If amending name, enter the new name of	the limited liabi	ility company here:					
The new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the designation "	LLC" or the abbrev	ianon "L.L	C."		
Enter new principal offices address, if applica	ble:	4330 NE 17th Avenue					
(Principal office address MUST BE A STREET ADDRE.		Onkland Park, FL 33334					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE E	<u>80X)</u>	4330 NE 17th Avenue Oakland Park, FL 33334		2016	······································		
B. If amending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:	or registered o ice address here	ffice address on our rec g:	eords, entereth	AM 9	of the new		
New Registered Office Address:	4330 NE 17th A	Avenue	<u> </u>	59			
A CONTRACTOR OF THE PROPERTY.		Enter Floridastreet a.	ldress				
	Oakland Park		, Florida <u>33334</u>				
		Cig		Zap Code			
New Registered Agent's Signature, if changing R	egistered 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

H18000293369

☐ Change

<u>Title</u>

MGR

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

Name

Jereiny Van Fleet

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