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COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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:
Kim Wasielewski Name of Person
EAR Responsible Productions & Consulting LLC Firm/Company
33700 SW 192nd Ave Address
Homestead F1 33037 City/State and Zip Code
Wazzi fan Qaol. Lon E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: As at (305) 522 1232
Kim Wasielewsky a1 (305) 522 1232 7 7 1
Name of Person Area Code Daytime Telephone Number 50
Enclosed is a check for the following amount:
City/State and Zip Code Wazzı fam Qaol. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code Name of Person Area Code Daytime Telephone Number of Status Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations 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

EAR Responsible Productions & Consultants 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 2/28/17 and assigned
Florida document number <u>L 17000047363</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
EAR Responsible Production The new name must be distinguishable and contain the words "Limited Liabi	Ity Company," the designation "LLC" of the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	EAR Responsible Productions & Consulting Ilc
(Principal office address MUST BE A STREET ADDRESS)	215. Krome Ave
	Home Stead, F1 33030
Enter new mailing address, if applicable:	EAR Responsible Productions of Consulting IK
(Mailing address MAY BE A POST OFFICE BOX)	33700 SW 192nd Ave
	Home Stead, F1 33034
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:	SECRETALLA
New Registered Office Address:	Enter Florida street address
	Enter Florida street address Florida City Cit
	City Zh Code
New Registered Agent's Signature, if changing Registered Agent:	0 9
I hereby accept the appointment as revistered agent and agr	ee 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>	Address	Type of Action
			
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ective date, if other than the date of filing: a effective date is listed, the date must be specific and cannot be prior to date of filing or m	optional) ore than 90 days after filing.) Pursuant to	605.020
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ed July 28 . 2017.		
Signature of a member or authorized representative	of a member	

Page 3 of 3

Filing Fee: \$25.00