117000049211

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COVER LETTER

	egistration So ivision of Cor					
SUBJECT		5th Gym Productions, LLC Name of Limited Liability Company				
SOBOLCI	· -					
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspo	ondence concerning this matter	to the following:			
		Michael Reyes				
			Name of Person			
			Firm/Company			
		1111 Lincoln Road, Suite 300				
			Address			
		Miami Beach, FL 33139	,			
		City/State and Zip Code Airam@juviamiami.com				
		E-mail address: (to be used for future annual report notifi	cation)		
For further	information c	oncerning this matter, please ca	all:			
Michael R	eyes		305 676-2654			
	Name o	f Person	at () Area Code Daytime	Telephone Number		
Enclosed is	s a check for th	ne 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

5th Gym Productions, LLC		
(Name of the Limited (A	Liability Company as it now appears on our recording Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liab Florida document number L17000049211	ility Company were filed on 03/2/2017	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
12 · · · · · · · · · · · · · · · · · · ·		
		2
		-0
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BO	<u></u>	??
B. If amending the registered agent and/or registered agent and/or the new registered offic	•	rds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	lress
		Florida
	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>	Type of Action
MGRM Jonas Millan	1111 Lincoln Road	□ Add	
		Suite 300	
			Remove
		Miami Beach, FL 33139	☐ Change
MGRM Miguel Mawad	1111 Lincoln Road		
	Suite 300		
		Miami Beach, FL 33139	Remove
		<u> </u>	Change
MGRM	MGRM MIMA Holding, LLC	1111 Lincoln Road	Add T
_		Suite 300	Add Note: The second of the
	Miami Beach, FL 33139	□ Change	
MGRM Dino Spencer	1111 Lincoln Road	©3 ☑ Add	
	Suite 300	□ Remove	
	Miami Beach, FL 33139	☐ Change	
MGRM Michael Reyes	1111 Lincoln Road	_	
		Suite 300	□ Remove
	Miami Beach, FL 33139	☐ Change	
		-	
		□ Adđ	
		□ Remove	
		Change	

	13. T
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(but statutory filing requirements, this date will not be listed as the
the record specifies a delayed effective date, but not) The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of:
Dated March 15th , 2017	_•
Signature of a member or authori	zed representative of a member
Michael Reyes	
Typed or printed	name of cignon

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Filing Fee: \$25.00