LITOCOMO 139

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: CORRECTION PER CONVENDATION With ALESSANDRA LIVINGSTON 8/23/2017 KS

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2017 AUG 21 PM 3: 34

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COVER LETTER

Div	ision of Corp	orations		
eliblezer.	The Photo S	tudio Group LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	dence concerning this matter	to the following:	
		Alessandra Livingston		
			Name of Person	
		The Andres Lopez Law Fig	rm, PA	
			Firm/Company	
		7351 Wiles Road Suite 10	l	
			Address	
		Coral Springs, FL 33067		
			City/State and Zip Code	
		alivingston@alopezlawfirm		
			to be used for future annual report notif	ication)
For further in	nformation co	ncerning this matter, please ca	all:	
Alessandra	Livingston		754 581-3799 at () Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e following amount:		
■ \$25.00 I	filing Fee	S30.00 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:

TO:

Registration Section

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

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METAHAGSLE, FLORIDA,

The Photo Studio Group LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number 1.17000160139	·		
This amendment is submitted to amend the fo	flowing:		
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "LLC."	-
Enter new principal offices address, if appl	icable:		_
(Principal office address MUST BE A STRE	ET ADDRESS)		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		- -
registered agent and/or the new registered			new
Name of New Registered Agent:	The Andres Lopez Law Firm, P		new
registered agent and/or the new registered	The Andres Lopez Law Firm, P 7351 Wiles Road Suite 101 Enter F	A Iorida street address	<u>new</u> -
Name of New Registered Agent:	The Andres Lopez Law Firm, P 7351 Wiles Road Suite 101 Enter F	A Iorida street address	new
	The Andres Lopez Law Firm, P 7351 Wiles Road Suite 101 Enter F Coral Springs	A	new

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
MGR	The Photo Studio Group LLC	4613 N. University Drive suite 158	□ Add
		Coral Springs, FL 33067	Remove
MGR	L AND M PRODUCTIONS LLC	4613 N. University Drive Suite 158	
		Coral Springs, FL 33067	
			Change
			Add Remove L
 . <u></u>			Charge T
			□ Remove
			Remove
			Change
			□ Add
			□ Remove
			☐ Change

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ective date, if other than the date of filing:	(optional) ior to date of filing or more than 90 days after filing.) Pursuant to 605.020
te: If the date inserted in this block does not meet the appl	licable statutory filing requirements, this date will not be listed a
cument's effective date on the Department of State's record	ds.
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The 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earlier of
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~ <i>(()</i>	
	milerizes representative of a member
Signature (Far incinior) of an	

Page 3 of 3

Filing Fee: \$25.00