

L17000186813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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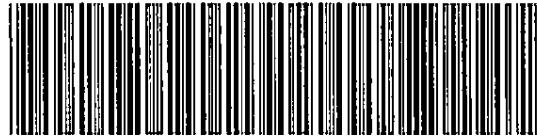
(Business Entity Name)

(Document Number)

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SECTION 17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ascension Aerial Productions LLC
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:

Logan C. Miller
Name of Person

3174 Burdock Ave
Firm/Company
Address

Melbourne, FL 32904
City/State and Zip Code

ascensionaerialproductions@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Logan Miller at (321) 216-6832
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

ASCENSION AERIAL PRODUCTIONS, 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 8-31-2017 and assigned
Florida document number L17000186813

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3174 BURDOCK AVE
MELBOURNE, FL US 32904

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3174 BURDOCK AVE
MELBOURNE, FL US 32904

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, 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>	<u>Type of Action</u>
AR	MICHAEL J Long	2377 Lylewood Ct	<input type="checkbox"/> Add
		MELBOURNE FL 32904 ^{us}	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Logan C Miller	3174 Burdock	<input type="checkbox"/> Add
		MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL J Long	2377 Lylewood Ct	<input checked="" type="checkbox"/> Add
		MELBOURNE, FL 32904 ^{us}	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Logan C Miller	3174 Burdock Ave	<input checked="" type="checkbox"/> Add
		MELBOURNE, FL 32904 ^{us}	<input type="checkbox"/> Remove
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☐ Add
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DIVISION OF

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated OCTOBER 24, 2017


Signature of a member or authorized representative of a

Signature of a member or authorized representative of a member

Logan Miller
Typed or printed name of signer

Typed or printed name of signee