118000063131

(Requestor's Name)
` ' <i>'</i>
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SUBJEC	ጉጥ.	Change of	Creative PKM P	radictions		
SOBJEC	٠1٠ _	<u>-</u>	Name of Lim	ited Liability Company	<u></u>	
The encl	osed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn .	ill correspo	ondence concerning this matter	to the following:		
				Plan Productions		
			1006 Windm	M Ever Circle		
			<u>Grlando</u> , F	City/State and Zip Code	· > 5	J
			E-mail address:	City/State and Zip Code Crechac Plan To be used for future annual report noti	hadeniscionation)Y)
For furth	er in	ormation c	oncerning this matter, please c		·····,	
^			DCYNO f Person		e Telephone Number	
Enclosed	l is a	check for th	ne following amount:			
™ . \$25.0	00 Fi	ing 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)	
		MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Creative Plan Productions, LLC		
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on March 9, 2018	and assigned
Florida document number L18000063131		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		(T) , parts
		رن
B. If amending the registered agent and/or registered registered agent and/or the new registered office address because in the new registered agent and/or the new registered agent and/or the new registered agent and registered agent ag	l office address on our records, <u>ent</u> o	()
to the rest of the second of t	M.C.	· · · · · · · · · · · · · · · · · · ·
Name of New Devictored Avent		÷ , , , ,
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 Age	nt:	

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>	Address	Type of Action
MGR	Courtney Luczywo	1006 Windmill Grove Circle Orlando Fl, 32828	
			□ Remove
			☐ Change
AMBR	Christopher Luczywo	1006 Windmill Grove Circle Orlando, FL 32878	
			☐ Remove
			☐ Change
			☐ Remove
			Change
			Add Add
			≥ □ Remove
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ective date, if other than the effective date is listed, the date mus e: If the date inserted in this blument's effective date on the De	be specific and cannot be ock does not meet the a	applicable statutor	ng or more than 90 days all	i tional) ter filing.) Pursuant to 605.0 his date will not be listed
record specifies a delayed he 90th day after the reco		ut not an effec	tive time, at 12:01	. a.m. on the earlier
November 26 ed	2018			
		·		

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Typed or printed name of signee

Filing Fee: \$25.00