## L18000135310

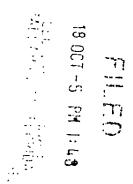
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
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## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	SILVERWO	ORK PRODUCTIONS LLC	C	
SOBOLCI.		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return	all correspon	dence concerning this matter t	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N. Brand Blvd., 11th	h Fłoor	
			Address	
•		Glendale, CA 91203		
			City/State and Zip Code	
		b.chavira@silverworkpro		
		E-mail address: (t	to be used for future annual report notific	cation)
For further in	nformation co	ncerning this matter, please ca	all:	
Cheyenne i	<u> </u>		at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for the	e following amount:		
□ \$25.00 F	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)

TO:

Registration Section

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

SILVERWORK PRODUCTIONS LLC		
( <u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	s it now appears on our records.) Ity Company)	
The Articles of Organization for this Limited Liability Company wer Florida document number <u>L18000135310</u> .	e filed on 5/31/2018 and as	ssigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
he new name must be distinguishable and end with the words "Limited Liability	Company," the designation "LLC" or the abbreviation	·L.IC."
Enter new principal offices address, if applicable:	<del>`</del>	
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	"17
<u> </u>		عبدت. سيدي
inter new mailing address, if applicable:	; PO	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
_		
B. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here:	address on our records, enter the name	of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<del></del>	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Joseph Price	208 Cape Circle	□ Add
		Panama City Beach, Florida 32413	☑ Remove
			□ Remove
			C Remove
			FAdd
			☐ TI
			7
<del></del>			Add
			☐ Remove
			☐ Remove
			Add
			Remove

	<del></del>
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	te of filing:
the date this document is filed by the Florida	
the date this document is filed by the Florida	
the date this document is filed by the Florida  Dated 10-1-18	
Dated 10-1-18	a Department of State)

Page 3 of 3

Filing Fee: \$25.00