

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000098113 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062

Fax Number

Phone : (323) 962-8600 : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Sma.	÷	3	Address	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAXX STUDIOS & MULTIMEDIA LLC

Certificate of Status	U
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

APR 0 2 2020

Electronic Filing Menu Corporate Filing Menu

Help

## **COVER LETTER**

то:	Registration Se Division of Cor			÷	ď	.•
cun i	MAXX ST	UDIOS & MULTIMEDIA LLO	С			
SUBJI	ECT:	Name of Lim	ited Liability Compar	ıy		<del></del>
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Perso	on .		
		Legalzoom.com, Inc.				
			Firm Compan	.y		<del></del>
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
			City/State and Zip	Code		
		b.mattis@yahoo.com	to be used for future :		a a sa Gazaria.	
Law 650	alesa information o	oncerning this matter, please ea		annuar reper	t nonneano.	,
1. Of 101	ист шотпасоп с	onceiting this matter, piease ca				
Cheye	nne Moseley		800 at (	773-08: )		
-	Name o	d Person	Area Cod	le D	aytime Telej	phone Number
Enclos	ed is a check for the	he following amount:				
□ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Certified Co (additional cop	іру	)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr	ING ADDRESS: ration Section on of Corporations	Re	gistration S		ADDRESS:

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Taflahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited I.	Lability Company as it now appears on our records.) Torida Limited Liability Company)	
(V)	Torida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	lity Company were filed on 12/14/2018	and assigned
Florida document number [118000287028	· ·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	202
Maxxstar Enterprise LLC		020 AI
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C.5"
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A		P
	and the state of t	. ω 💯
		17
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u>x)</u>	
		·
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records,	enter the name of the new
registered agent and or the new registered office	244763	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	***	
-	, Flor	idu Zıp Code
New Registered Agent's Signature, if changing Reg	Istered 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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ ∧dd
			□ Remove
			☐ Change
			D Add 2020
		MINIST TO STATE OF THE STATE OF	□ Add 2020 Remaye
			Add Add Remove
			□ Change
			C Add
		<del></del>	☐ Remove
			☐ Cluange
			□ Add
			□ Remove
			Change
			□ Remove
			☐ Change

					· <del></del>
					<del></del> .
<u></u>		<u> </u>		<del></del>	
			_, 41, =2,		
-			·		
	.,	*******			
					20 <b>20 AP</b> R
			· · · · · · · · · · · · · · · · · · ·		1
					P.
					ယ္
					8
			·····		
				<del></del>	
***		gang war as were with the contribution of the			
tive date, if other than the ffective date is listed, the date may 1 if the date inserted in this between the ffective date on the f	slock does not meet the a	applicable statutor	ng or more than 90 d y filing requireme	_ (optional) ays after filing.) Po nts, this date wi	arsumn to 60 ll not be lis
	ed effective date, bu	it not an effec	tive time, at 1	2:01 a.m. on	the earl
cord specifies a delaye e 90th day after the rec	cord is filed.				
cord specifies a delaye e 90th day after the red I Fehruar	cord is filed.	20.			
cord specifies a delayer of the rest of the second specifies a delayer of the rest of the second specifies a delayer of the second specifies a	cord is filed.	20.	utative of a member		

Page 3 of 3

Filing Fee: \$25.00