L18000287546

(Re	questor's Name)	
———(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Jolf 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:
Lauren Anastai-Peter Name of Person
Firm/Company
7860 NW 84th Cive
Parkland, F. 33067 City/State and Zip Code
E-mail address: (to be used for future annual report Autification)
For further information concerning this matter, please call:
Lawren Anastus - Peter at (94) aq4-5658 Name of Person Area Code Daytime Telephone Number 75
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Registration Section Registration Section

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

Jolf Productions	uc			
(Name of the Limited Liability (A Florida I	Company as it now ap limited Liability Compa	opears on our records.) my)		
The Articles of Organization for this Limited Liability Co Florida document number <u>L 1800028754(</u>	mpany were filed or	19/17/18	and assig	ned .
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability compan	<u>v here</u> :		
The new name must be distinguishable and contain the words "Limite	ed Liability Company,"	the designation "LLC" or the	ne abbreviation "L.L.	.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	<u></u>			
		·	,	
				. , .
Enter new mailing address, if applicable:				11
(Mailing address MAY BE A POST OFFICE BOX)				<u></u>
			 ب	J.F
B. If amending the registered agent and/or registered agent and/or the new registered office addre		s on our records, <u>en</u>	ter the name o	<u>f the nev</u>
Name of New Registered Agent:				
N D : 100 All				
New Registered Office Address:	Ente	r Florida street address		
		, Florida		<u> </u>
	City		Zip Code	
New Registered Agent's Signature, if changing Registered	Anont:			

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>	Address	Type of Action
NGR_	Lauren Anastasiteter	7840 NW 8445 are Partland F	L Add
			Remove
			Change
			🗆 Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			D Add
			□ Remove
			🗆 Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
			□ Change

	
	
	<u> </u>
(If an e Note:	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	January 24th, 2019. Thursday Signature of a member or authorized representative of a member
	Laure of a member of authorized representative of a member Lauren Anastasi - Peter Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00