Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARCELL FELIPE, P.A.

Account Number : 120110000064 Fhone : (305)381-8500 Fax Number : (305)381-6225

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VASALLO/ACOSTA PRODUCTIONS LLC

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6 2019

Electronic Filing Menu Corporate Filing Menu

Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vasallo/Acosta Productions LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as It now appears on our rec Lability Company)	ords.)
The Articles of Organization for this Limited Liability Company	y were filed on 02/01/2019	and assigned
Florida document number L19000033308		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Eye Entertainment Group LLC		
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation 'L	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u>.</u> i
	****	<u> </u>
Enter new mailing address, if applicable:		. > 1
Mailing address MAY BE A POST OFFICE BOX)		رپ ب
		المدا
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address he  Name of New Registered Agent:		ords, enter the name of the n
New Registered Office Address:		
	Enter Florida street ade	dress
		Florida
	City	Zip Cock

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

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## If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR=	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
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			□ Remove
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if amending any other	information, enter c	hange(s) bere; (Al	iach additional si	ecis, if necesso	<b>, (</b> , <b>1</b>
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