Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : I20120000052 : (305)591-9180 Phone : (305)591-9167 Fax Number

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

Email Address: nico velas quez @ me. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INTERACTIVE PRODUCTIONS LLC

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JUN 28 2019

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTERACTIVE PRODUCTIONS LLC (Name of the Limited Liability Comps (A Florida Limited)	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L19000077873	were filed on $\frac{03/207}{2}$	2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:	:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the desig	gnation "LLC" or the abbre	riation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			2019
		:	- UN 2
Enter new mailing address, if applicable:			
(Mailing address MAY RE A POST OFFICE BOX)			<u>, , , , , , , , , , , , , , , , , , , </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on or re:	ur records, <u>enter th</u> e	name of the n
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent	,		
I hereby accept the appointment as registered agent and agreen provisions of all statutes relative to the proper and complete	ree to act in this cap	pacity. I further agree y duties, and I am fan	to comply with t

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 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>Γitle</u>	<u>Name</u>	Address	Type of Action
MGR	MONTANO, LAURA E	5225 NW 112TH AVE, APT 8	O Add
		DORAL, FL 33178	□ Remove
			□ Change
			Add
			☐ Remove
			·_ Chairse
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			Nemove 3
			Remove ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
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f an effective date, it other than the date fan effective date is listed, the date must be something. If the date inserted in this block of	does not meet the applica-	o date of filing or more to ble statutory filing rec	nan 90 days aner thing.) Plus quirements, this date will	not be listed
document's effective date on the Depart	rtment of State's records.			
ne record specifies a delayed eff	Fortivo data, but not	an effective time	at 12:01 a.m. on t	he earlier
The 90th day after the record	is filed.	dir circuit ciri	,, 40 22102 40,,00 000	
THATE STELL	2019			
Dated	1	- ATT 77	\supset	
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	nature of a member or author	and representative of a	memoer.	

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