

L19 000102820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

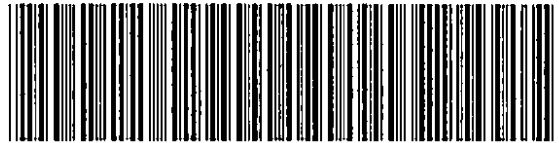
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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JUL 14 2020

AUG 25 2020

S. YOUNG

2020 JUL 14 PM 5:23

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MUSE 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:

Courtney L Morgan

Name of Person

The House of Muse

Firm/Company

3831 W State Rd 84 Unit 101

Address

Davie, FL 33312

City/State and Zip Code

Courtneymorgan87@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Courtney L Morgan

305
at ()

890-1323

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Courtney L Morgan	3831 W State Road 84 unit 101	<input type="checkbox"/> Add
		Davie, FL 33312	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

When I originally opened the LLC in 2019 I put my title as Director. I was not aware that under FL State

I must be either a authorized member or manager in order to open a bank account for the company.

I tried calling a few times to make sure I was filling the paperwork out properly. Thank you for helping me change my title from director to manager.

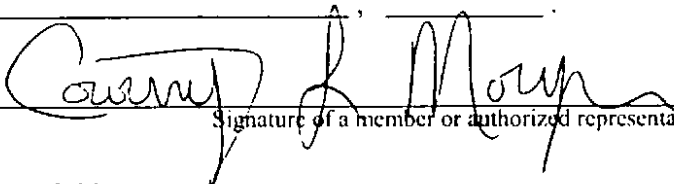
E. Effective date, if other than the date of filing: April 14th, 2019 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 9th, 2020



Signature of a member or authorized representative of a member

Courtney L Morgan

Typed or printed name of signee