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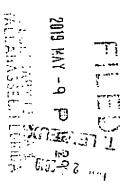
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COVER LETTER

TO:	Registration Se Division of Cor		,	
SUBJEC		tudios LLC		
		Name of Lin	nited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	cturn all correspo	ondence concerning this matter	to the following:	
		Dana Hellie		
		Pantheon Studios LLC	Name of Person	
		218 W De Soto Street	Firm/Company	
		Pensacola, FL 32501	Address	
		danahellie@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, please ca	all:	
Dana He	ellie		425 772-6190 at ()	
	Name o	f Person		e Telephone Number
Enclosed	l is a check for th	ne following amount:		
\$25.0	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 Tailahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Pantheon Studios LLC

(Name of the Limited Liability Company as it now appears on our records Y - Q (A Florida Limited Liability Company)

Florida document number L19000108728		2.2019 And assigned
		The state of the s
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the words	ls "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:	***
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
-		
Name of New Registered Agent: New Registered Office Address:	Enter Florida st	reet address
-		
-	City	reet address, Florida Zip Code

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> Dana Hellic	Address 218 W De Soto Street	Type of Action
MGR		Pensacola, FL 32501	■ Add
			Remove
			Add
			Remove
			Change

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If an effe <u>Note:</u>	date, if other than the date of filing:
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
Dated .	May 1 , 2019.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00