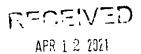
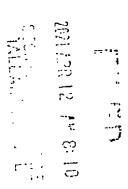
## L20000009654

Office Use Only



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D. BRUCE MAY 26 2021

## **COVER LETTER**

	Registration Sect Division of Corpo			<u>.</u>		
011 <b>B 11</b> 10		on Marketing Group LLC				
SUBJEC	1:	Name of Limi	ted Liability Company			
		mendment and fee(s) are subridence concerning this matter t				
	·	Jacqueline M Rosad				
		<del></del>	Name of Person			
		Tax House Miami				
		Firm/Company				
		301 NE 79th Street	#2			
			Address	<del></del>		
Miami FL 33138						
		City/State and Zip Code				
		jacqui@taxhousemiami.com	o be used for future annual report notil	fication)		
For furthe	er information co	neerning this matter, please ca			2021 5 - 1,	
Jacquelin	e M Rosado		786 615-2009 x1	09	2021 / CO 12	275 m # # # # # # # # # # # # # # # # # #
	Name of I	Person	Area Code Daytime	e Telephone Number	72	• 11 • • • • • • • • • • • • • • • • • •
Enclosed	is a check for the	following amount:				سده و <sub>دی</sub> .
<b>■</b> \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Connection Marketing Group LLC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on Jan 2, 2020	anc	l assign	ed
Florida document number 1.20000008654			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
PJ_Party_Production LLC			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbreviation	n "L.L.C	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on our records, enter the m	ame of the	new ro	<u>egister</u>
agent and/or the new registered office address here:		: <u>:</u>	إسب
	; -	1 2	• 1
Name of New Registered Agent:	· · · :		1 1 1
		·~	
New Registered Office Address:  Enter Florida street address	, ,		<u></u>
			-
, Florida	Zip C	رت	
City	Zıp C	oae -	

## 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 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
			□ Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			☐ Remove
			Ndtl □ Addi
		<u> </u>	Remove
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			□Change

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Filing Fee: \$25.00