# 120000022600

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(Document Number)
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A. BUTLER JAN 1 2 2022

# COVER LETTER

Carry Same

TO: Registration So Division of Co			
SIBJECT: Abraca	adabra Films LLC		
	Name of Lim	ned Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Devin	Moller Name of Person	
	Abraco	dabra Films Firm/Company	LLC
	3501 Be	SSie Coleman	Blvd #22453
-	Devin a	FL 3362 City/State and Zip Code abracacks bra - fill, to be used for future annual report noti	ns.com
For further information of	concerning this matter, please c	ıll:	
Devin M Name o	v lle ( of Person	at ( <u>813</u> ) <u>613 –</u> Area Code Daytim	3129 e Telephone Number
Enclosed is a check for t	he following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Abracadabra Films LLC

(Name of the Limited Liability Compa (A Florida Limited I	inv as it now appears on our records)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L\ 2\ 000\ 00\ 2\ 2\ 6\ 00}{}$	were filed on $1 - 15 - 2020$ 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	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	350/ Bessie Coleman Blvd Unit 22453 Tampa FL 33622
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3501 Bessie (oleman Blvd Unit 22453 Tampa FL 33622
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: Registered Office Address: 7901  St. Pet	istered Agents Inc. 4th St N STE 300  Enter Florida street address  ters burg Florida 33702  City Zip Code
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. Thereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary

H Changing Registered Agent, Signature of New Registered Agent

See attached form

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = 'Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Dominic Medina	111 6th Ave N #18; Sint Petersburg, FL	3570115 Add
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f an effective date i <u>Note:</u> If the date	s listed, the date inserted in thi	the date of filing must be specific and is block does not it e Department of S	I cannot be princet the appl	icable statutory	or more than 90 d filing requireme	_ (optional) ays after filing.) Pury nts, this date will	muant to 605.0207 (3)( not be listed as the
e record specifies ed is filed.	a delayed effe	ctive date, but not	an effective	time, at 12:01 a	.m. on the earlie	er of: (b) The 90t	h day after the
Dated Dec	ember	24th	202	<u>L</u>	<i>11</i>		
			<u></u>			_	
		Signature of a	member or au	thorized represent	ative of a member		<del></del>
	-	Devi	,	A 11			