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COVER LETTER

Registration Section

TO:

Division of Cor	porations		9
Lion & Şor	n Creative LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
		_	
Please return all correspo	endence concerning this matter	to the following:	
	William D Mattos		
	on the second se	Name of Person	
		Finn/Company	
	3521 Tennessee Ter		
		Address	
	Orlando Fl. 32806		
		City/State and Zip Code	
	stef.n.mattos@gmail.com	to be used for future annual report no	(theytion)
For further information c	oncerning this matter, please c		meanon)
Stefanie Mattos		407 739-9374	
Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	
Registration S Division of C		Registration So Division of Co	
P.O. Box 632		The Centre of	•
Tallahassee, l	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lion & Son Creative LLC

277FT 26 AMII:48

(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 02/03/2020 and assigned Florida document number L20000039902 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

I 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>	Type of Action
P	William D Mattos	3521 Tennessee Ter Orlando FI 32806	□ Add
			Петюче
			■Change
VPST	Stefanie Mattos	3521 Tennessee Ter Orlando FI 32806	= Add
			□Remove
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Effective date, if other than the diff an effective date is listed, the date must be Note: If the date inserted in this block	ck does not meet the applic	able statutory filing require	(optional) 0 days after filing.) Pursuant to 60 ements, this date will not be lis)5,0207 (sted as t
document's effective date on the Dep	partment of State's records.			
e record specifies a delayed effective rd is filed.	date, but not an effective ti	me, at 12:01 a.m. on the ea	rlier of: (b) The 90th day aft	er the
Pebruary 13th	2020	 ·		
Jam Ma	the			
Dated February 13th South	ignature of a member or author	orized representative of a men	ber	