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(Address)
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(Document Number)
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## **COVER LETTER**

TO:

TO: Registration Sect Division of Corpo						
AMD Produc	ctions, LLC	~	•			
SUBJECT:	_					
	Name of Lim	ited Liability Company	-			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please return all correspond	dence concerning this matter	to the following:				
	Ann Marie DiStasi					
		Name of Person				
	Divine Timing Creative, L	LC	-:- -:	000 000 000	2021 MAR 15	
		Firm/Company		· [3] · [3]	¥	Î
	11511 Storywood Dr.		:: 5:- 5:-	- (		138cm
		Address			PH	1,25.
	Riverview, FL 33578		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	NATS	4:49	10.20
	divine.timing.creative@gm	City/State and Zip Code ail.com		4 - 7	Φ	
	E-mail address: (	to be used for future annual report noti	fication)			
For further information cor	ncerning this matter, please co	all:				
Ann Marie DiStasi		813 392-9133				
Name of	Person	at () Area Code Daytim	e 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)	S60.00 File Certificate Certified (additional c	of St Copy	tatus &	
Mailing Address:		Street Address:				
Registration Se		Registration Se				
Division of Co P.O. Box 6327		Division of Cou The Centre of T	•			
Tallahassee Fl			e Street Suite 81	n		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	···
The Articles of Organization for this Limited Liability Comp	pany were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Divine Timing Creative, LLC		<b>202</b>
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC" or the	bbreviation "IslaG."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<b>9</b>	
	្រ ក្ម 	<u> </u>
	1—1	TATE
Enter new mailing address, if applicable:		ті <b>ч</b>
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>enter the nar</u>	ne of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<del>-</del>
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

AMD Productions LLC

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>	<u>Address</u>	Type of Action
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	e date of filing: st be specific and ca lock does not mee	unnot be prior to da	te of filing or more statutory filing re	(optio than 90 days after quirements, this	n <b>al)</b> filing.) Pur date will	suant to o	605.0207 listed as
Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	epartment of Stat	e s records.					
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the record specifies a delayed effective cord is filed.	re date, but not an	effective time, a	nt 12:01 a.m. on t	he earlier of: (b)	The 90t	th day a	fter the

Filing Fee: \$25.00