LROCCCC 86832

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	<u></u>
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JUN 29 2023

COVER LETTER

	gistration Se vision of Cor			
eup iezw.		MARCOS PRODUCTIONS	LLC	
SUBJECT:		Name of Lin	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		MARCOS GUERRERO		
			Name of Person	
		FINDING MARCOS PR	ODUCTIONS LLC	
Firm/Company				
		13514 SW 124TH AVE	NUE ROAD	
		.,	Address	
		MIAMI, FLORIDA 33186	3	
			City/State and Zip Code	
		findingmarcosproduction		100
For further i	nformation c	oncerning this matter, please c	to be used for future annual report not all:	ineation)
MARCOS	GUERRER	o	786 351-7449	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne 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)
	uiling Addres		Street Address: Registration Se	ection
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Ta	llahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION -OF

FINDING MARCOS PRODUCTIONS LLC

2026 11 77 9:08

(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 Liabili Florida document number L20000086832	ity Company were filed on MARCH 20	2020 and assigned
This amendment is submitted to amend the following	ng:	
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	<u> </u>	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:	•	
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on our records, <u>e</u> re:	nter the name of the new registered
Name of New Registered Agent:	, <u> </u>	
New Registered Office Address:		
	Enter Florida street address	
		, FloridaZip Code
	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, I hereby confirm that the limited liability company has been notified in writing of this change.

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>	<u>Address</u>	Type of Action
MGR	Elisa Ashley Lawson	216 HAZEL STREET UNIT "A" SANT	A ROSA C/ ⊟Add
		CALIFORNIA 95401	□Remove
			Change
			□Add
			Remove
			□Change
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			🗀 Remove
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			□Remove
			□Change

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(Variable (W.)	
Signature of a member or authorized representative of a member	
JACQUELINE M GUERRERO Typed or printed name of signee	

Filing Fee: \$25.00