## 120000112032

| (Requ                       | uestor's Name)         |
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| (C)- (i                     | 0                      |
| (City/s                     | State/Zip/Phone #)     |
| PICK-UP                     | WAIT MAIL              |
| (Busin                      | ness Entity Name)      |
| (Docu                       | ıment Number)          |
| Certified Copies            | Certificates of Status |
| Special Instructions to Fil | ing Officer:           |
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## COVER LETTER

| TO: Registration So<br>Division of Co |  |  |                 |                         |                              |
|---------------------------------------|--|--|-----------------|-------------------------|------------------------------|
| SUBJECT: Flo                          | M Botton +- Cong                             | Sulfing LLC  |                 |                         |                              |
|                                       | Name of Lim                                  | ited Liability Company   | <del> </del>    |                         |                              |
|                                       |  |  |                 |                         |                              |
| The enclosed Articles of              | Amendment and fee(s) are sub                 | mitted for filing.   |                 |                         |                              |
| Please return all correspo            | ondence concerning this matter               | to the following:  |                 |                         |                              |
|                                       | JOCELYN PETIT-JEAN                           |  |                 |                         |                              |
|                                       |  | Name of Person   | •               |                         |                              |
|                                       | FLAMBOYANT TALEN                             | Г MEDIA GROUP LLC  |                 |                         |                              |
|                                       |  | Firm/Company   |                 | <b>20</b><br>SE         |                              |
|                                       | 510 NW 24TH AVE #56                          |  |                 | 2024 HAR<br>SECRETATION | रम्म करू<br>द्वीत            |
|                                       |  | Address  |                 | R 12                    | 775.25<br>1'01 Ph            |
|                                       | FORT LAUDERDALE, F                           | L 33311  |                 | ASSET OF THE            | T                            |
|                                       |  | City/State and Zip Code  |                 |                         | به≃،ر<br>نی <sub>ه د</sub> ا |
|                                       | FLAMBOYANTCONSUL                             | *  |                 | 23<br>23                |                              |
|                                       |  | to be used for future annual report notific                      | ation)          |                         |                              |
| For further information c             | concerning this matter, please c             | all:   |                 |                         |                              |
| JOCELYN PETIT-JEAN                    | 1  | 754 221-5352<br>at ( )   |                 |                         |                              |
| Name e                                | of Person                                    |  | elephone Number |                         |                              |
| Enclosed is a check for the           | he following amount:                         |  |                 |                         |                              |
| ■ \$25.00 Filing Fee                  | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified       | e of Status &           |                              |
| Mailing Address Registration          | Section                                      | Street Address:<br>Registration Secti                            |                 |                         |                              |
| Division of C<br>P.O. Box 632         |  | Division of Corpo<br>The Centre of Tal                           |                 |                         |                              |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Hamboyant cons  |  |                                    |
|---|--|------------------------------------|
| ( <u>Name of the Limited Liabili</u><br>(A Florida  | ity Company as it now appears on our red<br>a Limited Liability Company) | cords.)                            |
| The Articles of Organization for this Limited Liability C Florida document number <u>L20000112032</u>     | Company were filed on <u>04/24/2020</u>                                  | and assigned                       |
| This amendment is submitted to amend the following:   |  |                                    |
| A. If amending name, enter the new name of the lim  | ited liability company here:   |                                    |
| FLAMBOYANT TALENT AND COMPANY LLC   |  |                                    |
| The new name must be distinguishable and contain the words "Lin   | nited Liability Company," the designation "                              |                                    |
| Enter new principal offices address, if applicable:   |  | 2024h<br>SEC                       |
| (Principal office address MUST BE A STREET ADDI   | RESS)  |                                    |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                      |  | PH 4:22                            |
| B. If amending the registered agent and/or registere agent and/or the new registered office address here: | d office address on our records, <u>en</u>                               | ter the name of the new registered |
| Name of New Registered Agent:   |  |                                    |
| New Registered Office Address:  |  |                                    |
|   | Enter Florida street ad  | dress                              |
|   |  | Florida                            |
|   | 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> | Address I                          | ype of Action                           |
|--------------|-------------|------------------------------------|---|
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|              |             |                                    | Change                                  |

| PI                    | ding any other information, enter change(s) here: (Attach additional sheets, a LEASE APPLY MONEY ORDER # 19603959495 TO THIS AMENDMENT.  |  |   |
|-----------------------|--|--|---|
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|                       | Late of the date of filings  | _ (optional)                               |   |
| Note:                 | ve date, if other than the date of filing:  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 d.  If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records. | ays after filing.) Purents, this date will | suant to 605.0207 (<br>not be listed as t |
| If the red<br>(b) The | ford specifies a delayed effective date, but not an effective time, at $1$ 90th day after the record is filed.   | 2:01 a.m. on                               | the earlier of                            |
| Dated                 | 1000 Di p 1 DS 000   | \ ,  |   |

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