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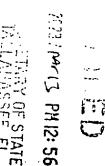
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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R. HUNT 03/13/23

COVER LETTER

TO:

Registration Section

Division of Corporations							
our mor	Branken Recprds LLC						
SUBJECT:	Name of Limited Liability Company						
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Brandon Morales					
			Name of Person				
			Firm/Company				
		2651 NW 84th Way					
			Address				
		Sunrise, FL 33322					
			City/State and Zip Code				
		brandon@djbrandonmorale	s.com to be used for future annual report no	atification)			
For further in	nformation c	oncerning this matter, please c					
Brandon Mc			305 801-9163				
	Name o	f Person	Area Code Dayti	me Telephone Number			
Enclosed is a	check for th	ne following amount:					
■ \$25.00 I	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 Address: Registration Section		Street Address: Registration S	ection				
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee				
	llahassee, l			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Branken Records	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company	were filed on 05/26/2020 and assigned
lorida document number L20000140773	
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	ility company here:
MoMo Productions LLC	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	2651 NW 84th Way
Principal office address MUST BE A STREET ADDRESS)	Sunrisc, FL 33322
	3
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	AIE 55
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 registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Emer Florida street address
	, 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>	Name	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			□Remove
			☐ Change
			☐ Change
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			Change
			□Add
			□Remove
			Change
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			□Change

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an effective date lote: If the date	, if other than the c is listed, the date must te inserted in this blocative date on the De	be specific and cannot ock does not meet the	be prior to date of filit c applicable statutor	(option no or more than 90 days after figure than 90 days after figure this continue that the continue	ling.) Pursuant to 605.0207 (3
record specific I is filed.	es a delayed effective	date, but not an effo	ective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
February ated	/ 24th	202.	3		
			\rightarrow		

Typed or printed name of signee