L20000249235

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COVER LETTER

TO:	Registration Se Division of Cor			•	
cun in	One Titan I	Films LLC			
SUBJE	UI:	Name of Lin	nited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ro	eturn all correspo	ondence concerning this matter	to the following:		
		Jason Beaumont			
		· · · · · · · · · · · · · · · · · · ·	Name of Person		
		One Titan Films LLC			
			Firm/Company		
		11741 sw 243rd st.			
		•	Address		
			City/State and Zip Code	· <u>-</u>	
		princeton fl 33032	to be used for future annual re	nort notification	
For furth	ner information c	oncerning this matter, please o		•	
Jason B	eaumont		407 383-	3877	
	Name o	f Person	at () Area Code	Daytime Teleph	none Number
Enclosed	d 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)		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Add		
	Registration S Division of C		_	ion Section of Corporati	ons
	P.O. Box 632			re of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

One Filant Films LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our re Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Con Florida document number L20000249235	mpany were filed on <u>08/14/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Girl Next Door LLC		
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	<u> </u>	2028 SEC
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		min ze C
		<u></u>
		1E 5
 If amending the registered agent and/or registered of agent and/or the new registered office address here: 	office address on our records, <u>c</u>	nter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		, 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 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	Type of Action
			□ Add
			Remove
			Change
			□Remove
			□Change
			□Add
		·	□Remove
			Change
			□Add
		*****	Remove
			□Change
			🗀 Add
			CRemove
			□Change
			CJAdd
			□Remove
			□Change

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