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COVER LETTER

TO: Registration Section Division of Corporations

BOMBSHELL CREATOR STUDIOS HOLDING COMPANY LLC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Caitlin Pyle

Name of Person

BOMBSHELL CREATOR STUDIOS HOLDING COMPANY LLC

Firm/Company

1810 Barker Dr

Address

Winter Park, FL 32789

City/State and Zip Code

hey@caitlinpyle.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Caitlin Pyle

Name of Person

at (_____) Area Code Daytime 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) \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOMBSHELL CREATOR STUDIOS HOLDING COMPANY LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 23, 2020 and assigned Florida document number 1.20000316462

This amendment is submitted to amend the following:

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 "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	ACC 22 C
	AND
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

	City	Florida Zip Code
New Registered Office Address:	 Enter Florida street a	uldress
Name of New Registered Agent:		

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, <u>enter the title, name, and address of each person</u> being added . <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Michael Houbriek	3042 PLAZA TERRACE DRIVE	□Add
		ORLANDO, FL 32803	
			□Change
MGR	Caitlin Pyle	1810 Barker Dr	■Add
		Winter Park, F1, 32789	🗆 Remove
			□Change
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Sep	2021
	Chr. W. a
	Signature of a member or authorized representative of a member
	V aithin Pyle, Authorized Member

Typed or printed name of signee