(Requestor's Name) (Address) (Address)	000358429960
(City/State/Zip/Phone #)	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
	REPERTER LORDA
Office Use Only	JAN 22 2001

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# DATE 1/21/2021 #WALK IN# ENTITY NAME REVEIL INTERNATIONAL PICTURES, LLC DOCUMENT NUMBER \*\*PLEASE FILE THE ATTACHED AND RETURN\*\* XXXX Plain Copy 1 1 2 2 2 2 Certified Copy Certificate of Status \*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\* Certified Copy of Arts & Amendments Certificate of Good Standing \*\*APOSTILLE' / NOTARIAL CERTIFICATION \*\* COUNTRY OF DESTINATION \_\_\_\_ NUMBER OF CERTIFICATES REQUESTED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

TOTAL OWED \$25.00

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ACCOUNT #: 120160000072

- " 5 E."

Please call Tina at the above number for any issues or concerns. Thank you so much!

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#### TO: Registration Section Division of Corporations

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:

Shama Stepp c/o ZenBusiness PBC

Name of Person

ZenBusiness PBC

Firm/Company

5900 Balcones Dr. Suite 5000

Address

Austin TX 78731

City/State and Zip Code

fulfillment@zenbusiness.com

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

Reveil International Pictures LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	<u>iny as it now appears on our records.</u> ) Liability Company)
"he Articles of Organization for this Limited Liability Company	were filed on 10/13/2020 and assigned
lorida document number L20000323362	
This amendment is submitted to amend the following:	
- 	
<ol> <li>If amending name, <u>enter the new name of the limited liab</u></li> </ol>	ulity company here:
he new name must be distinguishable and contain the words "Limited Liabi	
	lity Company," the designation "LLC" or the abbreviation "L.L.C." 2234 North Federal Highway
Inter new principal offices address, if applicable:	
Enter new principal offices address, if applicable:	2234 North Federal Highway
Inter new principal offices address, if applicable:	2234 North Federal Highway # 1334
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS)</u>	2234 North Federal Highway # 1334
Enter new principal offices address, if applicable:	2234 North Federal Highway # 1334 Boca Raton, FL 33431
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2234 North Federal Highway # 1334

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a
	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>	Name	Address	Type of Action
AMBR	Ruth Friedman	2234 North Federal Highway	[] Add
		# 1334	🗆 Remove
		Boca Raton, FL 33431	Change
AMBR	NaOhMee Renee Fisher	2234 North Federal Highway	🖸 Add
		# 1334	🗆 Remove
		Boca Raton, FL 33431	■Change
			🗆 🖂 🖂
			□Change
			🗋 Add
			🗆 Remove
			□Change
			Dyper The Transform
			□Change
			🗆 Add
			🛛 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than t (If an effective date is listed, the date r <u>Note:</u> If the date inserted in this document's effective date on the	block does not meet the application	able statutory filing requirement	(optional) ys after filing.) Pursuant to 605.0207 (2 ts, this date will not be listed as th
e record specifies a delayed effec ord is filed.	tive date, but not an effective ti	me, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Dated	2021		
/s/_Ruth_Friedn	an Signature of a member or autho	rized representative of a member	
Ruth Friedman			
·	Typed or printe	ed name of signee	