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COVER LETTER

то:	Registration Sec Division of Corp		, ·	,		
SUBJI	BOXI	R STUDIOS LLC				
30031		Name of Lim	nited Liability Company			
The en	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspor	dence concerning this matter	to the following:			
		Ulises	Anderson			
			Name of Person			
		SOLID AC	CCOUNTING LLC			
			Firm/Company			
	240 N BISCAYNE RIVER DR					
		-	Address			
	City/State and Zip Code					
		uanders E-mail address: (on@yoursolidaccounting to be used for future annual report noti	g.com fication)		
For fur	ther information co	ncerning this matter, please c	·	,		
(Ulises Ander	son	at (<u>786</u>) <u>309-38</u> Area Code Daytim	06		
· · · · · · · · · · · · · · · · · · ·	Name of		Area Code Daytim	e Telephone Number		
		following amount:				
△ \$2:	5.00 Filing Fee	S30.00 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
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

UNISION OF CORPORATION

21 MAR 22 MIII: 05

BOXR STUDIOS LLC		
(Name of the Limited Liability Company as it (A Florida Limited Liability	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were for Florida document number	filed on and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	company here:	
The new name must be distinguishable and contain the words "Limited Liability Con	onpany," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office addres	ess on our records, enter the name of the new registere	
agent and/or the new registered office address here:		
N CN D LA		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	City , Florida Zip Code	
	лу Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree to a provisions of all statutes relative to the proper and complete performance.		

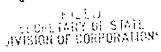
accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

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



21 HAR 22 耕川: 05

<u>Title</u>	<u>Name</u>	Address 21 Mar 22 Anti- 03	Type of Action
MGR	Steve Santacruz	1625 N MIAMI AVE	
		Miami, Fl 33136	□Remove
			□Change
MGR	JOSH PAVAO	1625 N MIAMI AVE	□Add
		Miami, FL 33136	⊠Remove
			□Change
_ .			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			□Add
		-	□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheet,	1 1. H.Chi. (AR) G.Orbarkstable	10:5î4H
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		781.41
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7160-		
		
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 c Note: If the date inserted in this block does not meet the applicable statutory filing requirement	_ (optional) lays after filing.) Pu ents, this date wil	rsuant to 605.0207 (3)(b I 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 earliere ord is filed.	er of: (b) The 90	th day after the
Dated March 15		
Signature of a member or authorized representative of a membe	Г	
MATTHEW ATTALLA		
Typed or printed name of signee	-	-

Filing Fee: \$25.00