(20000396112

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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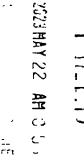
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7/18/23 VW



COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SURIFCT:	KIN6570NC	57VN105, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		
Please return all correspo	ndence concerning this matter	to the following:	
	An	7 A 7715 Name of Person	
		Name of Person	
		NESTUNE MEDI	A GROUP LLC
		Firm/Company	
	1330	Cryzen's Bird.	Ste. 701
1330 Cr47en's Bivd., Ste. 701 Address			
	Lees	bung, Fr. 34742	3
		City/State and Zip Code	
	E-mail address: ()	A + R + S + O + R + N + O + F + T to be used for future annual report not	ification)
For further information co	oncerning this matter, please ca		
An 7	AYDIS	at (<u>357</u>) <u>26 3</u> Area Code Daytin	1-4529
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e following amount:		
₩ \$25.00 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)
Mailing Address		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ONE SIUDIO.		 -
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability C Florida document number		12/21/20	and assigned
'his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ited liability company h	<u>ere</u> :	
U.S. ANIM The new name must be distinguishable and contain the words "Lim	ATION, LLC.		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the o	designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			23
Principal office address MUST BE A STREET ADDR	RESS)		 그로
Salara and Adams of annihing block			A I
Enter new mailing address, if applicable:			خ د
(Mailing address MAY BE A POST OFFICE BOX)			
	<u></u>		
3. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	d office address on our r	records, <u>enter the name</u>	of the new regist
N. D. 'A. LOSS All			
New Registered Office Address:	Enter Flo	rida street address	
		, Florida _	
	City	, Florida	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
			□Remove
			☐Change
			□ Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			[iChange
			□Add
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			□Change
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		CiAdd
			□Remove
			□ Change

	NO OTHER CHANGES.
	JUST CURPORATE NAME CHANGE.
-	
_	
	<del></del>
	· · · · · · · · · · · · · · · · · · ·
(If an effect <b>Note:</b> If	date, if other than the date of filing:
f the record s record is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Muy 17, 2023.  Signature of a member or authorized representative of a member
	An A. Im
	Signature of a member or authorized representative of a member
	1
	MT 1. AYR 15 Typed or printed name of signee