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COVER LETTER

TO:

Registration Section

Division of Co	rporations	• •	
Walk The	Walk Productions, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
	ondence concerning this matter	_	
r lease return an correspo	indence concerning this matter	to the ronowing.	
	Sharon L Pfeiffer		
		Name of Person	
	Walk The Wal	K Productions, LL	C
		Firm/Company	
	380 West Palmetto Park R	td. C214	
	hd-9-14 v	Address	
	Boca Raton FL 33432		
		City/State and Zip Code	· · · - · · · ·
	shardan323@hotmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Sharon L. Pfeiffer		954 802-4582	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	ne following amount:		
■ \$25.00 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 Addres Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632	•	Division of Cor The Centre of 3	-
Tallahassee, I			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Walk The Walk Productions, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Torida document number L21000043876	were filed on January 22nd, 2021	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u></u>
		<u> </u>
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		- 2 5
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		- 2 - 2
If amending the registered agent and/or registered office agent and/or the new registered office address here:	nddress on our records, <u>enter the n</u>	ame of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Parametrical and the	
	Enter Florida street address	
·	, 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
MGR	Sharon Cravero Pemberton	3212 NE 12th St.	≣Add
		#306	□Remove
		Pompano Beach, FL 33062	- ~.
			□Add
			□Remove
		□Change	
			□Add
			□Remove
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Note: If the dat	f other than the date s listed, the date must be sp inserted in this block di tive date on the Departr	oes not meet the ap	pplicable statuto	ng or more than 90 day ry filing requiremen	(optional) ys after filing.) Pursi its, this date will r	ant to 605.0207 tot be listed as
record specifie Lis filed.	a delayed effective date	, but not an effecti	ive time, at 12:0	l a.m. on the earlier	of: (b) The 90th	aday after the
5/30 ated	5	un 2024	Plug	Hu		
			. v v			
	Signa	ture of a member or	aut orized represe	entative of a member		

Filing Fee: \$25.00