

To:

Page: 1 of 5

2024-06-13 07:40:42 UTC+14

18506176383

From: ZenBusiness User

12/6/24, 12:25

Division of Corporations

H24000205660 3

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

((H24000205660 3))



H240002056603ABCZ

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.  
Account Number : I20230000190  
Phone : (844)449-3624  
Fax Number : (512)597-0678

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
HEARTPATH PRODUCTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

M. SOLOMON

JUN-12 2024

Electronic Filing Menu

Corporate Filing Menu

Help

H24000205660 3

To:

Page: 2 of 5

2024-06-13 07:40:42 UTC+14

18506176383

From: ZenBusiness User

**COVER LETTER**

H24000205660 3

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Heartpath productions LLC

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:

Jonathan Taboada

Name of Person

ZenBusiness INC

Firm/Company

336 E. College Ave Suite 301

Address

Tallahassee, FL 32301

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:

c/o ZenBusiness INC

844 493-6249

at ( )

Name of Person

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  
(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

24 JUN 12 PM 2:30

FILED  
DIVISION OF  
CORPORATIONS

H24000205660 3



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H24000205660 3

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anecé Goody	1490 Marie st	<input checked="" type="checkbox"/> Add
		Malabar, FL 32950	<input type="checkbox"/> Remove
		US	<input type="checkbox"/> Change
MGR	Natasha Williams	621 Montanna ave	<input checked="" type="checkbox"/> Add
		Palm Bay, FL 32909	<input type="checkbox"/> Remove
		US	<input type="checkbox"/> Change
AMBR	Madison Prendergast	278 Cameron st SE	<input checked="" type="checkbox"/> Add
		PALM BAY, FL 32909-4333	<input type="checkbox"/> Remove
		US	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 JUN 13 07:40:42  
ZENBUSINESS  
STATE OF FLORIDA

To:

Page: 5 of 5

2024-06-13 07:40:42 UTC+14

18506176383

From: ZenBusiness User

H24000205660 3

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

26 JUN 12 PM 2:30  
STATE OF NEW YORK

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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 06/12 2024

/s/Madison Prendergast

Signature of a member or authorized representative of a member

Madison Prendergast, Member

Typed or printed name of signer

Filing Fee: \$25.00

H24000205660 3