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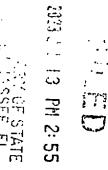
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

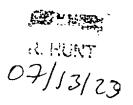
Office Use Only



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Profit Corporation pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- > If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	rporations					
CUDIFCT.	MFI STI	JDIOS WORKSHOP				
SUBJECT:		ited Liability Company			-	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:		·	1.43	٠٠.
		ENGELS MOLA		芸為		•
		Name of Person		<i>အ</i> သ အသ ကြာ	-3 PH	[1]
	M	IEL STUDIOS WORKSHOP	- 	ins Tig	$\ddot{\wp}$	
		Firm/Company		Li.	55	
	63	31 NE 165TH STREET, #3		. <u></u>		
		Address				
		MIAMI, FLORIDA, 33162			_	
	MEI	City/State and Zip Code STUDIOS.BIZ@GMAIL.COM				
		to be used for future annual report notif	ication)		-	
For further information of	concerning this matter, please c	all:				
ENGELS	S MOLA	at (941) 249-1744	ļ			
Name o	of Person	Area Code Daytimo	Telephon	e Numb	er	
Enclosed is a check for t	he following amount:					
□ \$25.00 Filing Fee		□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		Certifie	cate of ed Cop	Status &
Mailing Addre		Street Address:	•••			
Registration Division of C		Registration Sec Division of Cor		ıs		
P.O. Box 632		The Centre of T				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEL STUDIOS			
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appea d Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Compar	ny were filed on	03/24/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company h	ere:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the c	designation "LLC" or the a	bbreviation L.L.C."
Enter new principal offices address, if applicable:			,, - ¹ -:
Principal office address MUST BE A STREET ADDRESS)			I B PH 2:
Enter new mailing address, if applicable:	2054 BLAIR	RD. JACKSONVILL	元 E, 所L 3 222 21
Mailing address MAY BE A POST OFFICE BOX)			. .
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	e address on our r	ecords, enter the nar	ne of the new regist
New Registered Office Address:	Enter Flo	rida street address	
	CATHER 1 10	A TANAL MAIL OF EA PARAME MAILS.	
		. Florida	

New Registered Agent's Signature, it 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	! Nuch Mola Bakker ! Nuch Mola Bakker 5/29/2023	631 NE 165TH STREET, #3, MIAMI FL, 3316	52_
	5/29/2023		□ Change
AMBR	ENGELS MOLA	631 NE 165TH STREET, #3, MIAMI FL, 3316	5 <mark>2</mark> Add
	Engels Mola 5/29/2023	· · · · · · · · · · · · · · · · · · ·	d Remove
			□ Change
			C Add
		:	□ Remove
		ATTASSEE, FL	D Addr. N D Remove
			🗆 Change
			
			□ Remove
			🗆 Change
			🗆 A d d
			□ Remove
			□ Change

If amending any other information, enter change(s) here: (Attach additional	sheets, if necessary.,)
GOOD MORNING.		
ENGELS MOLA HAS BE SUBSTITUTED AS CEO BY ILISH MOLA BA	KKER.	
PLEASE MAIL THE CERTIFIED COPY TO OUR MAILING ADDRESS	i:	
2054 BLAIR RD, JACKSONVILLE, FL 32221		
THANK YOU FOR YOUR KIND ASSISTANCE.		
BEST REGARDS		
		2023
	- <u></u>	
	MAY.	<u>~~</u>
	min	<u> </u>
	ப்ப	V C
	FL	ណ្ឌ
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more to the Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.		
the record specifies a delayed effective date, but not an effective time. The 90th day after the record is filed.	e, at 12:01 a.m. o	n the earlier
Dated MAY 29TH , 2023 . Signature of a member or authorized representative of a	a member	
arguature of a member of authorized representative of a	inemoi	
ENGELS MOLA Typed or printed name of signee		
t pred to printed name of signed		

Page 3 of 3

Filing Fee: \$25.00