## 

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





06/14/21--01022--005 \*\*25.00

## **COVER LETTER**

TO:	Registration Se Division of Cor			
	SALAMAN	DRA PRODUCTIONS USA,	LLC	
SUBJ	ECT:	Name of Limi	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ARAUJO ALDANA, FRA	NCISCO	
			Name of Person	
			Firm/Company	
		14246 BOCA KEY DR		
			Address	<del></del>
		ORLANDO, FL, 32824		
		E-mail address: (	to be used for future annual report notifi-	cution)
For fu	rther information co	oncerning this matter, please ca	all:	
FRAN	CISCO ARAUJO	ALDANA	305 3088674	
	Name o	Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	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 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

SALAMANDRA PRODUCTION	S USA, LLC			
(Name of the Lim	ited Liability Com (A Florida Limite	npany as it now appears on o ed Liability Company)	ur records.)	
The Articles of Organization for this Limited I Florida document number		ny were filed on	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited li	ability company here:		
N/A				
he new name must be distinguishable and contain the	words "Limited Lia	ability Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	N/A		
Principal office address MUST BE A STRE	ET ADDRESS)			
-			্	
			Ī	
Enter new mailing address, if applicable:		N/A	1	
<u>Mailing address MAY BE A POST OFFICE</u>	EBOX)			
			· · · · · · · · · · · · · · · · · · ·	
3. If amending the registered agent and/or gent and/or the new registered office addr	_	ee address on our record	ls, enter the name of the new regist	
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
	<u></u>	Enter Florida street address		
	N/A		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 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
CEO	ARAUJO ALDANA, FANCISCO	14246 BOCA KEY DR	
		ORLANDO, FL, 32824	<u>'_</u> _Add
			<b>X</b> Remove
			□ Change
CEO	ARAUJO ALDANA, FRANCISCO	14246 BOCA KEY DR	XAdd
		ORLANDO, FL. 32824	<b>A</b> ;//dd
			□Remove
			□ Change
<del></del>			
			□Remove
		<del> </del>	□ Change
	·		Remove
			Change
			□Add
			□ Change

Ifective date, if other than the date of filing:	
ffective date, if other than the date of filing:  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.) Pursua ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be perfective date on the Department of State's records.	and the
ffective date, if other than the date of filing:	Oth day after the
fective date, if other than the date of filing:	I not be listed a
	ursuant to 605.020
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