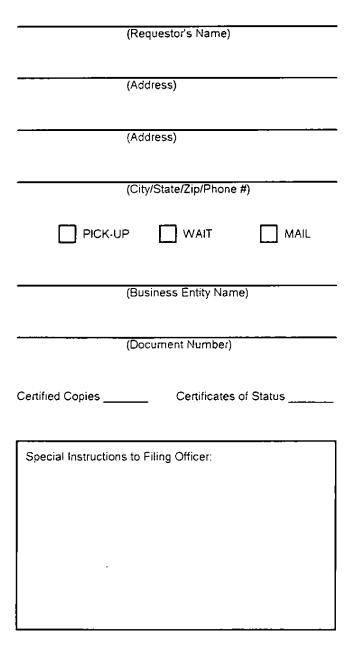
L21000246372



Office Use Only



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2023 DEC 19 PM 5: 05 SECKETARY OF STATE

December 12, 2023

Registration Section Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Dear Sir/Madam:

Enclosed please find application for Articles of Amendment to Articles of Organization for ANDREAS & NICO OF SOUTH FLORIDA LLC with document number L21000246372.

I have also included check number 3507 in the amount of \$30.00 to cover the filing fee and Certificate of Status.

Should you need any further information please do not hesitate to contact me at 305-728-5200.

Sincorole

Evelyñ-Espinoza- Diaz

COVER LETTER

Registration Section Division of Corporations

TO:

ANDREAS SUBJECT:	& NICO OF SOUTH FLORE	DA LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ANDREAS SELLINIDIS				
	Name of Person				
	ANDREAS & NICO OF SOUTH FLORIDA LLC				
	Firm/Company				
	701 BRICKELL AVESTE	1550			
	Address				
	MIAMI, FLORIDA 33131				
	-	City/State and Zip Code			
	info@andreassellinidis.com				
	E-mail address: (to be used for future annual report no	tification)		
For further information c	oncerning this matter, please c	all:			
Evelyn Espinoza Diaz		305 728-5200 at ()			
Name of Person		at () Area Code Daytir	ne Telephone Number		
Enclosed is a check for th	ne 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)		
<u>Mailing Address:</u> Registration Section		<u>Street Address:</u> Registration Sc	ection		
Division of Corporations		Division of Co	Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(<u>Name of the Limited Li</u> : (A Flo	ability Company as it now appears on our records. ondo Limited Liability Company))
The Articles of Organization for this Limited Liabilit Florida document number <u>L21000246372</u>	ty Company were filed on 05/26/2021	and assigned
This amendment is submitted to amend the following	<u>r</u> .	
A. If amending name, enter the new name of the	limited liability company here:	
SELLINIDIS PHOTO & FILM LLC		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered and/or the new registered office address her	ered office address on our records, <u>enter t</u>	SECRETARY OF STATE the name of the secretary of the secre
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flor	

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Change
			□Remove
			□Change
			□Add
			□Remove
			П <i>С</i> Ъ

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 _ Deember 12 2023 Signature of a member or authorized representative of a member ANDREAS SELLINIDIS Typed or printed name of signee

Filing Fee: \$25.00