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

(((H22000369405 3)))

Electronic Filing Cover Sheet



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Phone : (323)389-0502 Fax Number

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 UNO SOMOS FILMS, LLC

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10/31/2022 4:03:53 PM PAGE 1/001 Fax Server



October 31, 2022

FLORIDA DEPARTMENT OF STATE Division of Corporations

UNO SOMOS FILMS, LLC 3391 NW 125 WAY SUNRISE, FL 33323US

SUBJECT: UNO SOMOS FILMS, LLC

REF: L21000292904

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

An amendment cannot be filed for a company that is inactive.

If you have any further questions concerning your document, please call (850) 245-6051.

FAX Aud. #: H22000369405 KYLE D BRUMBLEY

Regulatory Specialist II Supervisor Letter Number: 722A00024404

Registration Section

COVER LETTER

TO:	Registration Se Division of Co					
eun ur		IOS FILMS, LLC				
SUBJE	CI:	Name of Limit	ed Liability Company			
The enc	losed Articles of	f Amendment and fee(s) are subm	nitted for filing.			
Please 1	eturn all corresp	ondence concerning this matter to	o the following:			
		Cheyenne Moselcy	Name of Person	a Me or one		
		Legalzoom.com. Inc.				
			Firm/Company			
		101 N Brand Blvd 11th Fl				
Address Glendale, CA 91203						
		City/State and Zip Code				
		jorge@valdesfla.com				
		E-mail address: (t	o be used for future annual report notifi	eation)		
For fur	ther information	concerning this matter, please ca	II:			
Cheye	nne Moseley		800 773-0888			
	Name	of Person	at () Area Code Daytime	Telephone Number		
Enclos	ed is a check for	the following amount:				
	5.00 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)		
		LING ADDRESS: Stration Section	STREET/COURI Registration Sectio			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 NOV 29 AM 1

UNO SOMOS FILMS, LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited I	inv as it now appears liability Company)	on our records.)
The Articles of Organization for this Limited Li Florida document number 1.21000292904	ability Company	were filed on 06/2	4/2021 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the de-	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	8402 ADALINA	PL.
(Principal office address MUST BE A STREE		ORLANDO, FL	32827
Enter new mailing address, if applicable:		8402 ADALINA	Pl.
(Mailing address MAY BE A POST OFFICE BOX)		ORLANDO, FL 32827	
B. If amending the registered agent and registered agent and/or the new registered o	or registered of	office address on re:	our records, enter the name of the new
Name of New Registered Agent:	Dr. Jorge L. Va	aldes	
New Registered Office Address:	8402 ADALIN		
		Enter Flori	da sirvei address
	ORLANDO	City	, Florida 32827 Zip Code
		Cuy	rap 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.

DR. Jorge L. Valles
If Changing Registered Agent. Signature of New Registered Agent

Dr. Jorge L. Valdes

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

LegalZoom.com, Inc.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Estevan L Valdes	8402 ADALINA PL ORLANDO, FL 32827	
			Remove
			☐ Change
AMBR	CLAUDIA P CUARTAS	3391 NW 125 WAY SUNRISE, FL 33323	
			🖶 Remove
			Change
			☐ Remove
			Change
			□ Remove
			Change
			Remove
			□ Change
			□ Add
			□ Remove
			□ Chance

ive date, if other than the date of filing:	
Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursually the date inserted in this block does not meet the applicable statutory filing requirements, this date will need a seffective date on the Department of State's records. Cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	
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	he earlier
10/18/2022,	
Estevans. Valdes	
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00