

121000 316523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

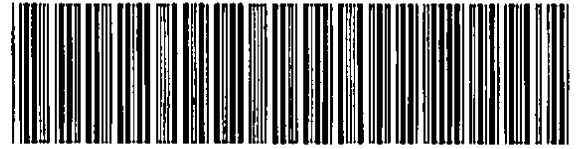
(Document Number)

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2021 DEC 20 AM 8:48  
OFFICE OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 JAN -3 PM 2:42

SECRETARY OF STATE  
TALLAHASSEE, FL

November 29, 2021

JOSE A STOUTE  
16425 SW 80TH ST.  
MIAMI, FL 33193

SUBJECT: CIMARRON FILMS PRODUCTION, LLC  
Ref. Number: L21000316823

We have received your document for CIMARRON FILMS PRODUCTION, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers  
Regulatory Specialist II

Letter Number: 121A00028631

## COVER LETTER

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

RECEIVED

SUBJECT: Cimarron Films Production, LLC  
Name of Limited Liability Company

2021 NOV 10 AM 1:51

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jose A. Stoute

Name of Person

Cimarron Films Production, LLC

Firm/Company

16425 SW 80th Street

Address

Miami, FL 33193

City/State and Zip Code

jastoute@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose A. Stoute

301

758-3689

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Cimarron Films Production, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12 July 2021 and assigned  
Florida document number L21000316823.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Cimarron Films, 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 ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

*City*, Florida

*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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Change

[illegible]

5 November, 2021

**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.

Dated 5 November

2021

Signature of a member or authorized representative of a member

Jose A. Stoute

Typed or printed name of signee

**Filing Fee: \$25.00**