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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	s to Filing Officer:	
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Office Use Only



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INTO !!

COVER LETTER

	gistration Se vision of Cor			
and the or		nond Studio's LLC	•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		Michael Dempsey		
			Name of Person	•
		ZenBusiness INC		
			Firm/Company	-
		5511 Parkerest Drive STE	103	
			Address	•
		Austin, Texas, 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		2021
For further i	information co	E-mail address: (oncerning this matter, please c	to be used for future annual report notification)	2021 DEC 2
		enBusiness INC	844 493-6249 at ()	27 PH
	Name o	f Person	Area Code Daytime Telephone Number	?? ?? ??
Enclosed is	a check for th	ne following amount:		
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status &
Re Di	ailing Addres Egistration S vision of C O. Box 632	Section orporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Та	Hahassee, F	F1. 32314	2415 N. Monroe Street, Suite 8	110

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Black Diamond Studio's LLC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Bability Company)				
he Articles of Organization for this Limited Liability Company	were filed on 2021-11-02	and assigned			
lorida document number $\frac{1.21000473947}{}$.					
his amendment is submitted to amend the following:					
. If amending name, enter the new name of the limited liab	ility company here:				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."			
Inter new principal offices address, if applicable:	4005 Post Street				
Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32205				
inter new mailing address, if applicable:	4005 Post Street				
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32205				
3. If amending the registered agent and/or registered office :	address on our records, <u>enter the n</u>	ame of the new regist			
gent and/or the new registered office address here:		2 2			
		2021 DEC			
Name of New Registered Agent:					
New Registered Office Address:		27 91 2:			
	Enter Florida street address	10 1			
	. Florida	73			

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.

Cuv

Zip Ĉide

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			Add Dri BRemove
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			□Remove
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ffective date, if other than the data an effective date is listed, the date must be some of the date inserted in this block ocument's effective date on the Department.	e specific and cannot be prior k does not meet the applic	able statutory filing		ling.) Purst	
record specifies a delayed effective of is filed.	date, but not an effective t	ime, at 12:01 a.m. o	i the earlier of: (b)	The 90th	ı day after the
ated December 16	2021	·			
<u>/s/ George Kiadii Ji</u> si	P				