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Division of Corporations

Florida Department of S

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLACK OWL STUDIOS LLC

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COVER LETTER

TO:	Registration Division of C	Section Corporations	
		OWI, STUDIOS LLC	
SUBJE	CT:	Name of Limited Liability Company	
		of Amendment and fee(s) are submitted for filing.	
Please re	eturn all corres	spondence concerning this matter to the following:	
		Cheyenne Moseley	
		Name of Person	
		l.egalzoom.com, inc.	
		. Firm/Company	
		101 N Brand Blvd Uth Fl	
		Address	
•		Glendale, CA 91203	
		City/State and Zip Code augustdays.nicki@gmail.com	
		E-mail address: (to be used for future unnual report notification)	
For furt	her informatio	n concerning this matter, please call:	
Cheyen	ine Moseley	. 800 773-0888	
	Nam	at (
Enclose	d is a check fo	ir the following amount:	
□ \$25	.00 Filing Fce	☐ \$30.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 01/20/2022 and assigned Florida document number L22000039347 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, onter the name of the new registered agent and/or the new registered office address bere: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address	BLACK OWL STUDIOS LLC		
The Articles of Organization for this Limited Liability Company were filed on	(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florido street address P. C.	The Articles of Organization for this Limited Liability Comp		and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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	This amendment is submitted to amend the following:		
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Name of New Registered Agent: New Registered Office Address: Enter Florido street address P	B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>ent</u> s here:	er the name of the new
New Registered Office Address: Enter Florida street address			202;
Enter Florida street address	Name of New Registered Agent:		
	New Registered Office Address:		Y 27
Plante - · · · ·	<i>,</i>	Enter Florida street address , Florida	PH FB
City , Florida Zip C&	·	· · · · · · · · · · · · · · · · ·	Zip Cost
New Registered Agent's Signature, if changing Registered Agent:	New Registered Agent's Signature, if changing Registered As	gent:	57

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

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<u>Title</u>	Name	Address	Type of Action
AMBR	ZWIER. PRISCILLA N		D Add
		6241 NW HACIENDA LN PORT SAINT LUCIE, FL 34986	Remove
ī			Change
AMBR	Priscilla N. Philip	6241 NW Hacienda Ln. Port Saint Lucie, Florida 34986	
			Remove
			Change
			□ Remove
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pated 5 May 23 - 2017		
	The	e 90th day after the record is filed.
Signature of a number or dithorized representative of a member	ated	5 May 23 - 2012
		Signature of a humber or authorized representative of a member
		The state of the s
		Typed or printed name of signee

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Filing Fee: \$25.00