L22000132514

(F	Requestor's Name)
	Addinas
4)	Address)
	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
 ,	
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions to I	Filing Officer:
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11	
	J. HORNE
	OCT - 5 2022

Office Use Only



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2022 OCT -4 PH 3: 22

2022 OCT -4 AMII: 2

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Button Man Filr	ns. LLC		
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			Art of Inc. Fife
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
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Name	Date	Time	UCC 11 Retrieval
Walk-In		p	Courier
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COVER LETTER

Registration Section Division of Corporations

TO:

BUTTON SUBJECT:	MAN FILMS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ANTHONY CALIENDO		
		Name of Person	
	BUTTON MAN FILMS L	LC	
		Firm/Company	•••
	1200 N.W. 17TH AV., Sui	ite 2	
		Address	
	Delray Beach, Fl 33445		
		City/State and Zip Code	
	acaliendo@fnbcflorida.com		-
	E-mail address: (to be used for future annual report not	tification)
For further information	concerning this matter, please co	all:	
Anthony Caliendo		561 305-4436 at ()	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration So Division of Co The Centre of 7	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIL ED 2022 OCT -4 AHII: 27

BUTTON MAN FILMS LLC

(Name of the Limited Liability Company as it now appears on our records Company 11 (A Florida Limited Liability Company)

		City		Zip Code
			, Florida	Zip Code
New Registered Office Address:		Enter Florida stre	et address	
Name of New Registered Agent:				
B. If amending the registered agent and/or regi agent and/or the new registered office address h		ddress on our records	s, enter the name	e of the new registered
France march 1977 1977 (11777) 100	<u>///</u>			
Enter new manning address, it applicable: <u>(Mailing address MAY BE A POST OFFICE BO</u>) Y)			
Enter new mailing address, if applicable:				
(Principal office address MUST BE A STREET)	ADDRESS)			
Enter new principal offices address, if applicable	le:			
The new name must be distinguishable and contain the word	ls "Limited Liabili	ity Company," the designati	on "LLC" or the abb	previation "L.IC."
A. If amending name, enter the new name of the	<u>ne limited liabi</u>	lity company here:		
This amendment is submitted to amend the follow	ing:			
Florida document number 1.22000132514	<u> </u>			
The Articles of Organization for this Limited Liab		were filed on March 31	, 2022	and assigned

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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ciro DaPagio	1200 N.W. 17th Av., Suite 2	
		Delray Beach, FL 33445	■Remove
			□Change
			□ Add
			□Remove
		 	□Change
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			
			□Remove
			Change
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			□Change

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f an effective d Note: If the c	te, if other than the date of filing:	5.020 ted as
e record speci d is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
Dated Octobe	er 3	
	$\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}\mathcal{A}$	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00