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Registration Section

Tallahassee, FL 32314

TO:

Division of C	Corporations			
	g Productions LLC			
SUBJECT:	Name of Lim	rited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	spondence concerning this matter	to the following:		
	Fabrizio I			
	Name of Person			
	ZenBusiness INC.			
		Firm/Company		
	336 E College Ave, Ste 30)]		
		Address		
	Tallahassee, FL 32301			
		City/State and Zip Code		
	fulfillment@zenbusiness.co	om to be used for future annual	romant matificati	on)
For further information	s concerning this matter, please c		Te jane manikum	····,
Fabrizio C/O ZenBusi			7-7349	
Nam	e of Person	512 23 at () Area Code	Daytime Fel	ephone Number
Enclosed is a check fo	r the following amount:			
■ \$25.00 Filing Fee	_	☐ \$55.00 Filing Fee of Certified Copy radditional copy is end		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Add Registration Division of P.O. Box 6	n Section Corporations	Divisio	ddress: ation Section of Corpora ntre of Talla	ations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Road Dog Productions LLC		
(Name of the Limited Liability (A I lorida f	Company as it now appears on our records.) .imited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number 1.23000008671	mpany were filed on 2023-01-04	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		H-1
(Principal office address MUST BE A STREET ADDRE	<u> </u>	202
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		HAR 28 AH IO:
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the</u>	38
Name of New Registered Agent:		···-
New Registered Office Address:	Enter Florida street address	
	, Floric	la
	City	la 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

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Matthew Notter	4818 SE Major Way	□Add
		STUART, FL 34997	■Remove
			□Change
			□Add
			□Remove
	.,		□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Channo

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Page 2 of 3

. If amending any other more	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
		<u>-</u>
 Note: If the date inserted in this 	the date of filing:	o 605.0207 (3 · listed as th
the record specifies a delay) The 90th day after the r	yed effective date, but not an effective time, at 12:01 a.m. on the effective filed.	arlier of:
Dated	2023	
	/s/ Chris Klemencic	_
	Signature of a member or authorized representative of a member	-
Chris Klemeneic		
	Typed or printed name of signee	-

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Filing Fee: \$25.00