L23000056037

(Requestor's Name)	
(Åddress)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
(Document Number) Certified Copies Certificates of Status _	





500410944475

06/26/23--01014--008 **25.00



COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			• .	
SUBJECT: Ravenstar	Studios LLC			
		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Mark Frederick Witmer			
		Name of Person		
	Ravenstar Studios LLC			
		Firm/Company		
	2351 SOUTHHAMPTON	DR		
		Address	<u> </u>	
	TALLAHASSEE			
		City/State and Zip Code	-	
	markwitmerl@gmail.com	to be used for future annual report not	ification)	;
For further information c	concerning this matter, please co		,	:
MARK WITMER		at (850) 5836090		
Name o	of Person	Area Code Daytir	ne Telephone Number	li: l:3
Enclosed is a check for the	he 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 State Certified Copy (additional copy is enc	
Mailing Address		Street Address:	action	
Registration S Division of C		Registration So Division of Co		
P.O. Box 632		The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Nume of the Lim	ited Liability Company as it now at (A Florida Limited Liability Compa	opears on our records.) my)
The Articles of Organization for this Limited	Liability Company were filed or	1/31/23 and assigned
forida document number 1.23000056037	·	
This amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name	of the limited liability compan	<u>v here</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE		
nter new mailing address, if applicable:		: · · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		
i. If amending the registered agent and/or gent and/or the new registered office addr Name of New Registered Agent:		ur records, <u>enter the name of the new regi</u> Keep Mark Witmer
	Same	
New Registered Office Address:		r Florida street address
	Tallahassee	, Florida 32311
	City	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Angelique Witmer	2351 southampton dr. Tallahassee, FL 32311	□Add
			≣Remove
			□Change
			□Add
			□Remove
			⊡Add
			ERcmove
			ــَـَــِــِ لِكَا وَلَهُ الْمُعَالِّذِينَ الْمُعَالِّذِينَ الْمُعَالِّذِينَ الْمُعَالِّذِينَ الْمُعَالِّذِينَ ــــــــــــــــــــــــــــــــــــ
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			[T]Chapae

_					
_					_
_					
_					
_					
		·			
_					
_					
_		_			
_					
_				. 1	
_					
_					
f an effe Note:	re date, if other than the date of filing tive date is listed, the date must be specific and f the date inserted in this block does not not not's effective date on the Department of S	l cannot be prior to dat nect the applicable:	e of filing or more than 9	(optional) 00 days after filing.) Prements, this date wi	ursuant to 605.0207 If not be listed as t
record d is file	specifies a delayed effective date, but not d.	an effective time, a	it 12:01 a.m. on the ca	rlier of: (b) The 9	0th day after the
	23	2023			
Dated <u>-</u>	une 23				
Dated <u>-</u>	une 23	m,			:
Dated <u>-</u>	Mark 1	Vojet	-	sher	:
Dated <u>·</u>	Signature of a	member or authorized + MPR	representative of a men	ıber	: