

L23 000 115 330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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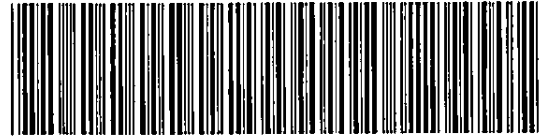
(Business Entity Name)

(Document Number)

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03/20/23--01031--005 **30.00

2023 MAR 20 AM 8:53
STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Brother Bear Productions LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Josaphat Gaubert	
Name of Person	
Brother Bear Productions LLC	
Firm/Company	
9769 Arbor Oaks Lane apt 301	
Address	
Boca Raton, FL 33428	
City/State and Zip Code	
joegaubert@gmail.com	
E-mail address: (to be used for future annual report notification)	

2023 MAR 20 AM 8:53
SEC. 1000 FL
TALLAHOSSEE

For further information concerning this matter, please call:

Jycobi Williams 229 2002663
_____ at (_____) _____
Name of Person **Area Code** **Daytime Telephone Number**

Enclosed is a check for the 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 Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Brother Bear Productions LLC

(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 March 6th, 2023 and assigned Florida document number 1.23000115330.

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 "L.L.C."

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

_____, Florida
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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Devonta Battle	311 West Adair Street	<input checked="" type="checkbox"/> Add
		Valdosta, Ga 31601	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jycobi Williams	13121 Moro Court	<input type="checkbox"/> Add
		Winter Garden, FL 34787	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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SLC
TALLAHASSEE, FL
2020 MAR 29 AM 3:53
Change

2023 MAR 20 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FL

2023 MAR 20 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 6th 2023

Signature of a member or authorized representative of a member

Josaphat Gaubert

Filing Fee: \$25.00