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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Cor	porations					
	roduction LLC					•
SUBJECT:	Name of Lim	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:				
	Melek Kosarsoy					
	-	Name of Person				
	Digitalia Production LLC					
•	-	Firm/Company			_	
	8350 NW 52nd Terrace Su	ite 301				
		Address		·· ···		
	Doral, FL 33166					
		City/State and Zip Co	de		2023 SEC	ures 4
	melekkosarsoy@gmail.com	to be used for future anni			門号	11
For further information c	roncerning this matter, please c		aar report nonnead	ion)	2023 DEC 22 PM 2: 19 SEGNETATE SEGNETATION	
Melek Kosarsoy			473-7754		# 2:	O
Name o	f Person	at () Area Code	Daytime Te	lephone Number	PAE 19	Ē)
Enclosed is a check for the	he following amount:					
€ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing For Certified Copy (additional copy is		Certified	e of Status &	
•						
Mailing Address Registration	Section	Regi	Address: stration Sectio			
Division of C	corporations	Divis	sion of Corpor	ations		

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

Digitalia Production LLC	itud Liabilita Cassas	tar ne it and amount as	re enouge t		
(,vame of the 1,ing	(A Florida Limited	my as it now appears on ou Liability Company)	ir recorus.)		
The Articles of Organization for this Limited I Florida document number L23000267746		were filed on June 02, 2	2023	and assigned	d
This amendment is submitted to amend the fol					
A. If amending name, enter the new name of	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designati	ion "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applicable:		8350 NW 52nd Terrace	e Suite 301		
(Principal office address MUST BE A STREI	ET ADDRESS)	Miami, FL 33166			
Enter new mailing address, if applicable:		8350 NW 52nd Terrace	e Suite 301	<u>. </u>	:
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33166			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office	address on our records	s, enter the name	第章 で	gistored
Name of New Registered Agent:	Melek Kosarso	у		PH 2:	U
New Registered Office Address:	8350 NW 52nd	Terrace Suite 301 Enter Florida sire	est addings	ATE 19	6
	Doral	v.mer r tortaa sire	<u> </u>	66	
		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>	Name	Address	Type of Action
			
			□Remove
			□Change
			□Add
			□Remove
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Dated	 → 605.0207 (→ listed as t
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Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	
	

Filing Fee: \$25.00