# L24000256458

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
OCT a 4 2001
OCT 2 1 2024

Office Use Only



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#### **COVER LETTER**

TO:	Registration Section
	Division of Corporation:

CINEWED SUBJECT:	PRODUCTION LLC				
JOBSECT.	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:			
	TANYA MILLIEN				
		Name of Person	14		
	CINEWED PRODUCTION	N LLC			
		Firm/Company			
	3930 ANGOLA LANE				
		Address			
	SANFORD, FLORIDA 32	771			
	T.MILLIEN@TEACHENR	City/State and Zip Code			
	•	to be used for future annual rep-	ort notification)		
For further information of	concerning this matter, please ea	all:			
TANYA MILLIEN		689 300-4-	146		
Name o	r Person	at () Area Code	Daytime Telephone Number		
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 enclose	\$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

CINEWED PRODUCTION LLC		2024:001 -2 Pil 3: 37
(Name of the Limi	ted Liability Company as it now appears on our re (A Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited L Florida document number L24000256458	iability Company were filed on 06/05/2024	and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and contain the vector new principal offices address, if applie (Principal office address MUST BE A STREE	cable:	'LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addre	· <del>-</del>	nter the name of the new registered
Name of New Registered Agent:	TANAYA MILLIEN	
New Registered Office Address:	3930 ANGOLA LANE	<del></del>
	Enter Florida street a	ddress

#### 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.

City

SANFORD

If Changing Registered Agent, Signature of New Registered Agent

, Florida 32771

Zip Code

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
			□Add
			□Remove
		<del></del>	Change
			⊒Add
			□Remove
			□ Change
<del></del>	<del></del>		□Add
			□Remove
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		<del></del>	□ Add
			□Remove
			☐ Change
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			□Remove
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ective date, if other than the d effective date is listed, the date must be: If the date inserted in this blocument's effective date on the Dep	e specific and cannot be price k does not meet the appli	cable statutory filing	(optional) re than 90 days after filing, requirements, this date	) Pursuant to 605.0207 will not be listed as
cord specifies a delayed effective a stiled.	date, but not an effective	time, at 12:01 a.m. or	o the earlier of: (b) Th	e 90th day after the
september 17	2024	·		
Janua	Delle Melle	nO		
	7			

# **COVER LETTER**

TO:

	on Section f Corporations		
CINE SUBJECT:	WED PRODUCTION LLC		
SUBJECT:	Name of I	Limited Liability Company	<del></del>
The enclosed Articl	les of Amendment and fee(s) are	submitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	TANYA MILLIEN		
		Name of Person	<del></del>
	CINEWED PRODUCT	TON LLC	
	<del></del>	Firm/Company	<del> </del>
	3930 ANGOLA LANE		
	<del></del>	Address	
	SANFORD, FLORIDA	. 32771	
	<del></del>	City/State and Zip Code	<del></del>
	T.MILLIEN@TEACHE		
		ss: (to be used for future annual report notification)	
For further informa	tion concerning this matter, pleas	e call:	
TANYA MILLIEN	I	639 300-4446 at ( )	
N	ame of Person	Area Code Daytime Teleph	one Number
Enclosed is a check	for the following amount:		
☐ \$25.00 Filing F	Fee S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registrat	ddress: tion Section	Street Address: Registration Section	
Division	of Corporations	Division of Corporation	ons
P.O. Box Tallahasi	x 6327 sec, FL 32314	The Centre of Tallaha	
i ananas.	300, I L J2J17	2415 N. Monroe Stree	i, suite ott

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CINEWED PRODUCTION LLC		222100 -2 Pil 3:3
	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited L Florida document number L24000256458	Liability Company were filed on 06	and assigned
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and contain the Enter new principal offices address, if application of the Astronomy of	cable:	designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our i	records, enter the name of the new registered
Name of New Registered Agent:	TANAYA MILLIEN	
New Registered Office Address:	3930 ANGOLA LANE	
	Enter Flo	rida street address
	City	, Florida <sup>3277  </sup> 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.

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iffective date, if other than the an effective date is listed, the date multiple. If the date inserted in this blocument's effective date on the E	e date of filing:  1st be specific and cannot be prior to  1ock does not meet the applical  Department of State's records.	o date of filing or more than 90 d ble statutory filing requireme	_ (optional) ays after filing.) Pursuant to 605.02 ents, this date will not be listed
The second of the L			
record specifies a delayed effecti	ve date, but not an effective tin	ne, at 12:01 a.m. on the earlin	er of: (b) The 90th day after the
record specifies a delayed effection is filed.	2024		
record specifies a delayed effection is filed.	2024	ize, at 12:01 a.m. on the earlied	

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