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(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
10 OCT -7 AM 10:09

T. HAMPTON

OCT -7 2010

EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: FESTIVAL PRODUCTIONS MXT, 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:

**ADRIANA PIRELA**  
Name of Person  
**FESTIVAL PRODUCTIONS MXT, LLC.**  
Firm/Company  
**1000 NW 14TH STREET**  
Address  
**MIAMI, FL 33136**  
City/State and Zip Code  
**adriana@bailbonds.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ADRIANA PIRELA** at ( **305** ) **381-7077**  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

10 OCT -7 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 29, 2010

ADRIANA PIRELA  
FESTIVAL PRODUCTIONS MXT, LLC  
1000 NW 14TH ST  
MIAMI, FL 33136

SUBJECT: FESTIVAL PRODUCTIONS MXT, LLC  
Ref. Number: L05000102199

We have received your document for FESTIVAL PRODUCTIONS MXT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II

Letter Number: 810A00023112

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

**FESTIVAL PRODUCTIONS MXT, 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 10/17/2005 and  
Florida document number L05000102199.

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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 end with 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:

MARK HEFFERNAN

New Registered Office Address:

1000 NW 14TH STREET

*Enter Florida street address*

MIAMI  
*City*

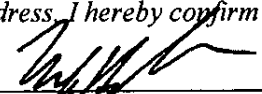
Florida

FL

*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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Festival Entertainment Group	1000 NW 14th Street Miami, FL 33136	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Ultra Enterprises, Inc.	1000 NW 14th Street Miami, FL 33136	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 10 OCT - 7 AM 10:00

Dated September 27, 2010



Signature of a member or authorized representative of a member

Russell C. Faibisch

Typed or printed name of signee