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BIVISION OF CORPORATIONS
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J. BRYAN

MAR 1 4 2008

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Rumba Entertainment 1LC (Name of Limited Liability Company) |
| (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: |
| Orlando Mendoza (Name of Person) |
| |
| (Firm/Company) |
| 5966 Abbey Road 2 Sign |
| Tamarac FL 33321 (City/State and Zip Code) For further information concerning this matter, please call: |
| (City/State and Zip Code) For further information concerning this matter, please call: |
| Orlando Mendoza at (954) 722-0039 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \text{(additional copy is enclosed)}\$\$\$ (additional copy is enclosed)\$\$\$ (additional copy is enclosed)\$\$\$}\$ |
| MAILING ADDDESS. STDEET/COUDIED ADDDESS. |

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | tertainment 1 | LLC | |
|--|--|--|------------------------------------|
| (<u>Name of the Limited Liab</u> (A Flori | <mark>ility Company as it now appears o</mark> da Limited Liability Company) | n our records.) | |
| The Articles of Organization for this Limited Liabilit | | 1/27/08 | and assigned SECRETARY OF STATE |
| This amendment is submitted to amend the following | ti | | FCORPORES |
| A. If amending name, enter the new name of the | limited liability company here: | | 1:39 |
| The new name must be distinguishable and end with the "L.L.C." | words "Limited Liability Company | ," the designation "LLC | C" or the abbreviation |
| B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent: | | records, enter the | name of the new |
| New Registered Office Address: | /B . | | |
| | (Ente | r Florida street addre | ?ss) |
| _ | , Florida | | |
| | (City) | | (Zip Code) |
| New Registered Agent's Signature, if changing Regist | ered Agent: | | |
| I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chan | r and complete performance of d agent as provided for in Chap tered office address, I hereby c | my duties, and I am pter 608, F.S. Or, if | familiar with and this document is |
| | (If Changing Registered Agent | , <u>Signature of New Regi</u> | stered 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 = M | lanaging Member | | |
|--------------|---|--|---|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| MGR | Orlando Mendoza | 5966 Abbey Road Tamarac FL 33321 | Add Remove |
| | | | Add Remove |
| D. If amend | ling any other information, enter chang | e(s) here: (Attach additional sheets, if necessary.) | ECRETARY OF STATEMS SECRETARY OF CORPORATIONS OF MAR 13 PM 1:39 |
| Dated | | authorized representative of a member Mendoza | |
| | Typed | or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00