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SAULSBERRY EXAMINER JUN 20 2013

COVER LETTER

Division of Corpo				
SUBJECT: AMPL	fred Enterto Name of Limit	inment Group, LL ed Liability Company	<u>C</u>	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	Torre Amplifie	Name of Person d Entertainment Gr Firm/Company	oup LLC	
	600 Via	Lugano Circle, Apt	. 208	
	Boynton B	each, FL 33436 City/State and Zip Code	⇒ :	61 KNF 6102
	E-mail address: (to	es 3200 Day amail. Co be used for future annual peport notification	<u>.0M</u> ≤2. on) ⊃ ⊆	
For further information cor	ncerning this matter, please ca	all:	30 L3 S	
Torrey Jone	Serson	at (<u>561)</u> 512-01 Area Code & Daytime Te	85 Ephone Number	0
Enclosed is a check for the	following amount:			
S25.00 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 of Certified Copy (additional copy is en	
		•		

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

Implified En		Droup, LLC			
<u>(Name of the Limited</u> (A	Liability Company as it nov Florida Limited Liability Co.	<u>v appears on our records.)</u> mpany)	•		
The Articles of Organization for this Limited Lie Florida document number <u>L130006</u>	ability Company were filed	on . 05 06 201	<u>3</u> _aı	nd assig	ned
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liability comp	any here:			
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liabilit	y Company," the designation	n "LLC" o	or the abl	 previation
Enter new principal offices address, if applica	ıble:		I A L L	2013	
(Principal office address MUST BE A STREE)	T ADDRESS)		775. * 7 7 2. **		1 ;
			<u></u>		g
Enter new mailing address, if applicable:			TO TO	Ari e	
(Mailing address MAY BE A POST OFFICE L	<u> </u>		- 5	===	<u></u>
B. If amending the registered agent and/oregistered agent and/or the new registered off		ess on our records, ent	er the na	ıme of	the new
Name of New Registered Agent:	Torrey o	lones			
New Registered Office Address:	600 Via C.	N. GANO C. () Enter Florida street	407, 7 address	<u>308</u>	
	Boynton	Beach, Florida	3 <u>3</u> Zip	543 Code	6

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

Page 1 of 3

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>	Address	Type of Action
M6RM	Torrey Jones	600 Via Lugano Circle, Apt. 208	Add
	•	Boynton Beach, FL 33436	Remove
			Add
			Remove
		·	
			Remove
		25: 25: 25: 27: 27:	
			Remove And Control
			Add
			Add
			Remove

· <u>-</u> ··	
6/13	. 2013 .
	Janua Janua
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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