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T. Burch NOV. 147 2014

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: MANMAR ENTERTAINMENT, 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:

	Mandi Miran	nda	
		Name of Person	
	MANMAR E	NTERTAINMEN	NT, LLC
		Firm/Company	
	340 West FI	agler Street	
	-	Address	
	Miami, FL 3	3130	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
Mandi Mira	ında	_{at} 917, 217-6	128
Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MANMAR ENTERTAINMENT, LLC		
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our records.) Liability Company)	······································
The Articles of Organization for this Limited Liability Compan	y were filed on 03/21/2011	and assigned
Florida document number L11000033734		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	<u>bility company here</u> :	
The new name must be distinguishable and end with the words "Limited Lia	ability Company," the designation "LLC" or the	-
Enter new principal offices address, if applicable:	340 West Flagler Street	ŽEC Z
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33130	AR Q
		SS - man
Enter new mailing address, if applicable:	340 West Flagler Street	For R In
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33130	RID 25
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address:		r the name of the new
	, Florida _	
New Registered Agent's Signature, if changing Registered Agen	City t:	Zip Code

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	Name	Address	Type of Action
	N/A		
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	te, if other than the date of filing:
date this d	

Page 3 of 3

Filing Fee: \$25.00

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