L00000055555

(Requestor's Name)				
(Address)				
(Address)				
(riddicss)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
,				

Office Use Only



800137837438

11/13/08--01030--001 **25.00

2008 NOV 13 AM 10: 46
SECRETARY OF STATE

T. CLINE
NOV 14 2008
EXAMINER

COVER LETTER

Division of Corp	porations				
SUBJECT. Mint En	tertainment, LLC				
SUBJECT: IVIII CETT		•			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
		_			
Please return all correspon	ndence concerning this matter	to the following:			
	David M. Goldstein				
		(Name of Person)			
		(Firm/Company)			
	4444 B 1 (-1) A 0:	31- 4040		d frank	
1441 Brickell Avenue, Suite 1013 (Address)				PSE I	
		(Addiess)		CRE NO	
	Miami, Florida 33131			2008 NOV 13 AM 10: 46 SECRETARY OF STATE TALLAHASSEE, FLORID	-
		(City/State and Zip Code)	<u>.</u>	SEE C	11
				TO SE	S. Carrier
For further information co	oncerning this matter, please c	all:		SET DI	
				Dri o	
David M. Goldstein		at (305) 372-3535			
(Name o	of Person)	(Area Code & Daytime T	elephone Number)		
Produced to a charak found	- Callandina amounts				
Enclosed is a check for th	-			_	
☑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status & Copy	
			(additional	copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

Mint Entertainment, LLC		
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our records I Liability Company)	.)
The Articles of Organization for this Limited Liability Compar	ny were filed on May 15, 2000	and assigned
Florida document number L00000005555		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and end with the words "Li	mited Liability Company," the designat	
"L.L.C."		200 SI
Enter new principal offices address, if applicable:		ZOOR NOV
(Principal office address MUST BE A STREET ADDRESS)		HARSE 3
		SSE 3
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
Manning undress MAT Burn 1 OS 1 OF 1 1 OS 2 OF 1		
B. If amending the registered agent and/or registered		ter the name of the new
registered agent and/or the new registered office address h	<u>ere</u> :	
Name of New Registered Agent:	<u>. </u>	
New Registered Office Address:		
-	(Enter Florida stre	et address)
	, Florid	
	(City)	(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 **Type of Action Address** <u>Title</u> <u>Name</u> MGR Charles Schreiner **₽** ✓ Add c/o David M. Goldstein 1441 brickell Avenue, Suite 1013 Remove Miami, Florida 33131 ☐ Add ☐ Remove 🗂 Add Remove Add Remove . If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ner 12, 2008 Signature of a member or authorized representative of a member

Typed or printed name of signee

Charles Schreiner

Page 2 of 2

Filing Fee: \$25.00