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AND ANASSEE FLORID

D. BRUCE

APR 14 2011

EXAMINER

COVER LETTER

Florida Department of State

Division of Corporations
SUBJECT: Lactor's Entertianment Group 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:
Hall A Porcelaiw Name of Person
The Factory Entertianbuent Group LLC
3495 North Hlatus Rd Sunnise Florida Zip 33351 Sunrise Florida 33351 City/State and Zip Code Daved 7321 at Com Cast, Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steven chase at 954 660-6269 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 Certified Copy (additional copy is enclosed) \$60.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

Division of Corporations

Registration Section

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number 1 0400002869 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 "LigG" 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: 461 NW 39PL SURRISE 33323 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

, Florida <u>3335</u>

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

MGR = Manaş MGRM = Mar	ger naging Member		
<u>Title</u>	Name	Address	Type of Action
M G RM	HAL Porcelain		Add Remove
MGRM	Steven Chase	2	Add ☐ Remove
m <u>br</u>	Rick Finkelste	ln	Add Remove
			Add Remove
<u> </u>			Add Remove
	····		Add Remove
D. If amendin	g any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
			_ _
		.1	11 APA
Dated Tust	Must Signature of a member	er or authorized representative of a member	AARY SF S
	Hal Porcelador	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00