

L04000037602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

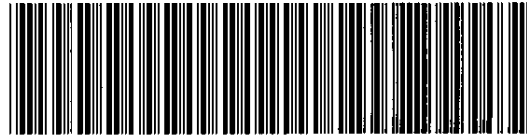
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800209095548

06/20/11--01018--001 **30.00

FILED
2011 JUN 20 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
JUN 22 2011

COVER LETTER

TO: Registration Section
Division of Corporations

FILED
2011 JUN 20 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ICOU-GO PRODUCTION, 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:

Nolberto Manzanero E JR
Name of Person
ICOU-GO PRODUCTION, LLC
Firm/Company
2045 N.E. 202 ST.
Address
Miami FL 33179
City/State and Zip Code
ICOMANZANERO@EMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ICOU MANZANERO at (786) 218-7097
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
- \$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

ICO.V.G.O Productions

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2011 JUN 20 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5.18.2004 and assigned Florida document number L04000037602

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

11930 N. Belf Shore DR APT 1406
Miami FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11930 N. Belf Shore DR APT 1406
Miami FL 33181

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:

Name of New Registered Agent:

Nolberto Mangano FJR

New Registered Office Address:

11930 N. Belf Shore DR APT 1406

Enter Florida street address

Miami, Florida 33181
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.

Nolberto Mangano
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gonzalez, ELVA	2045 N.E. 202 ST MIAMI FL 33179	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Noberto MANZANERO & JR	11930 N. B24 Shore DR APT 1406 MIAMI FL 33181	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

~~_____~~
~~_____~~
~~_____~~
~~_____~~

Dated 6.15.2011

[Signature]
Signature of a member or authorized representative of a member
Noberto MANZANERO, E JR*

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2011 JUN 20 PM 12:11
FILED