

LS000075054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

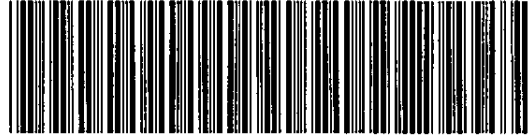
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 FEB 20 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED FEB 26 2015



February 13, 2015

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: DC711SPA, LLC

Dear Sirs:

Enclosed for filing please find the completed and executed Articles of Amendment to Articles of Organization of DC711SPA, LLC, Cover Letter and Check No. 1010050745 in the amount of \$25.00 for the filing fee.

Please contact me with any questions, or if any further information is needed. Thank you for your attention herein.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Rita Hoppert'.

Rita Hoppert

/rh

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DC711SPA, 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:

JOEL KARANSKY

Name of Person

WME | IMG

Firm/Company

200 FIFTH AVENUE, 7TH FLOOR

Address

NEW YORK, NY 10010

City/State and Zip Code

JOEL.KARANSKY@WMEENTERTAINMENT.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOEL KARANSKY

646

558-8367

at (_____) _____

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**

DC711SPA, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 08/10/2005 and assigned Florida document number L05000079054.

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 "LLC" 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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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15 FEB 20 AM 9:00
STATE OF FLORIDA
TALLAHASSEE

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 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ANTHONY D. CRISPINO	1360 EAST 9TH STREET, STE 100	<input type="checkbox"/> Add
		CLEVELAND, OH 44114	<input checked="" type="checkbox"/> Remove
MGR	JOHN H. RALEIGH	1360 EAST 9TH STREET, STE 100	<input type="checkbox"/> Add
		CLEVELAND, OH 44114	<input checked="" type="checkbox"/> Remove
MGR	CHARLES MCCARTHY	5500 34TH STREET, WEST	<input checked="" type="checkbox"/> Add
		BRADENTON, FL 33907	<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

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TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JANUARY 29, 2015

Signature of a member or authorized representative of a member
JOEL KARANSKY

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA