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TALLAHASSEE, FLORIDA

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T. CLINE

APR 2 3 2010

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: PACKA EVENTS 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:		
Sergio Vera		
Name of Person		
Derka prouk 110		
Firm/Company	~	
to use you but	_	
Address		
Dur 10/10 Ft 22/192		
City/State and Zip Code	- 	. 3
	SEC	2010
E-mail address: (to be used for future annual report notification)	소즘 큰	APR 22
For further information concerning this matter, please call:	TAR' ASS	2
,	1	Care Contract of the Contract
Sergio, UON at (Sel) 212 6976	S. 24.	
Name of Person Area Code & Daytime Telephone Number	7 <u>2</u> 2	 0
	Ömi ≯	မ
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Fi	ling Fee,	_
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy	ate of Statu d Copy	is &
	nal 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

. Para evas	s LLC.		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears mited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>S</u>	103/2006	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here	:	
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compan	y," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		5.0	2[
(Principal office address MUST BE A STREET ADDRE	ESS)	FO	70
		HE HE	70
		SEE SY 0	2 m
Enter new mailing address, if applicable:		는 () - 교	3
(Mailing address MAY BE A POST OFFICE BOX)			···
			<u></u>
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.		ır records, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	r Florida street address	3
<u> </u>		, Florida	
	City	2	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 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 **Title Type of Action** Name Address ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove Add Bemove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated _ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00