## L07000118584

| (Re                                     | equestor's Name)   |  |  |  |
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|   |                    | ************************************** |  |  |
| (Ac                                     | ldress)            |  |  |  |
| (Cit                                    | ty/State/Zip/Phone | e #)                                   |  |  |
| PICK-UP                                 | WAIT               | MAIL                                   |  |  |
| (Ви                                     | isiness Entity Nan | ne)                                    |  |  |
| (Document Number)                       |                    |  |  |  |
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SECRETARY OF STATE
TALLAHASSEE FLORINA

T. HAMPTON

JUL - 7 2008

EXAMINER

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| SUBJECT: OCEAN PROMOTIONS & 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:   |  |  |  |  |  |  |  |
| ANTHONY ALBERT (Name of Person)  OCCAN PROMOTIONS + EVENTS, CLC (Firm/Company)  |  |  |  |  |  |  |  |
| OCOAN PROMOTIONS + EVENTS, CLC (Firm/Company)   |  |  |  |  |  |  |  |
| 2550 S. BAYSHORE DR, #11 (Address)  |  |  |  |  |  |  |  |
| MIAMI, FL 33133 (City/State and Zip Code)   |  |  |  |  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |  |  |  |  |
| AWTHONY ACBELO at (305) 461-2700 (Name of Person) (Area Code & Daytime Telephone Number)  |  |  |  |  |  |  |  |
| Enclosed is a check for the following amount:   |  |  |  |  |  |  |  |
| \$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed) |  |  |  |  |  |  |  |

MAILING ADDRESS:
Registration Section;
Division of Corporations;
P:0-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

| (Name of the Limited Liability Compa<br>(A Florida Limited)  | ny as it now appears on our record    | <u>s.</u> )                                    |
|--|---------------------------------------|--|
| The Articles of Organization for this Limited Liability Company Florida document number <u>LO 7000118584</u> .       | y were filed on                       | and assigned                                   |
| This amendment is submitted to amend the following:  |                                       |  |
| A. If amending name, enter the new name of the limited lial  | bility company here:                  |  |
| The new name must be distinguishable and end with the words "Lim 'L.L.C."  | nited Liability Company," the designa | tion "LLC" or the abbreviation                 |
| Enter new principal offices address, if applicable:  |                                       |  |
| (Principal office address MUST BE A STREET ADDRESS)  |                                       | <u> </u>                                       |
| Enter new mailing address, if applicable:  |                                       | FILE JUL -3 LAHASSEE                           |
| (Mailing address MAY BE A POST OFFICE BOX)   |                                       | <u> 20 ₹ 0                                </u> |
|  |                                       | );;; <u>2:</u><br>                             |
| B. If amending the registered agent and/or registered o registered agent and/or the new registered office address he |                                       | nter the name of the new                       |
| Name of New Registered Agent:  | <u> </u>                              |  |
| New Registered Office Address:   |                                       |  |
|  | (Enter Florida str                    | eet address)                                   |
| <u> </u>   | , Flori                               | da(Zip Code)                                   |
| New Registered Agent's Signature, if changing Registered Agent   | (City)<br>                            | (Zip Code)                                     |
| new registered Agent's Signature, ii changing registered Agent   | <u>l •</u>                            |  |

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 = Mai<br>MGRM = M | nager<br>Ianaging Member          |   |                |
|-----------------------|-----------------------------------|---|----------------|
| <u>Title</u>          | <u>Name</u>                       | Address   | Type of Action |
| MGRM                  | AMADO ALBELO                      | 1780 6W 14 TER<br>MIAMI, FL 33145                       | Add Remove     |
| <u> </u>              |                                   |   | Add Remove     |
| <del></del>           |                                   |   | Add Remove     |
|                       |                                   |   | Add Remove     |
|                       |                                   |   | Add Remove     |
|                       |                                   |   | Add Remove     |
| D. If amend           | ding any other information, enter | change(s) here: (Attach additional sheets, if necessary | <i>).)</i>     |
|                       |                                   | TALLA JASSEE, FLORIDE                                   | ' ¬o           |
| Dated                 |                                   | 2008 / All  | o o            |
|                       | Signature of a n                  | Typed or printed name of signee                         |                |

Page 2 of 2

Filing Fee: \$25.00