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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Production Entertainment 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 Ferreira (Name of Person) Production Entertainment LLC SER 5 (Firm/Company) 8004 N.W. 154+h Street #30755 (Address) Miami Lakes, FL-33016 (City/State and Zip Code)
For further information concerning this matter, please call:
Sergio Ferreira at (786) 543-6007 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$\times \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed) 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

VIOQUETION Enter to (Name of the Limited Liability Compan	ainment L.L.C. y as it now appears on our records.)
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company	were filed on Agyst 26, 200 85 cs assigned
Florida document number <u>L0800081639</u> .	SEP T
This amendment is submitted to amend the following:	15 P ASSEEL
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	8004 N.W. 154th Street
(Principal office address MUST BE A STREET ADDRESS)	#309
	Miami Lakes, FL. 33016
Enter new mailing address, if applicable:	8004 N.W. 154th Street
(Mailing address MAY BE A POST OFFICE BOX)	
	#309 Miami Lakes, FL. 33016
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
	, Florida
	(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

0

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 Type of Action **Title Name Address** MGRM Sergio A. Ferreira

GRM Venture Consulting 14432 Ardach Place Miami Lakes FL 33016 MORM 13255 SW 135 ave Miami, Fl 33186 Add Remove MGRM Harold Valdes M6RM MBRM Sergio Ferreira ſ**⊤** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00