108000097563

, (Re	questor's Name)			
	•			
: (Ad	dress)			
(Address)				
(Cit	y/State/Zip/Phone	<u>, #)</u>		
(Oit	yrotaterzipii none	, m _j		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Cartified Capies	Cortificates	of Status		
Certified Copies Certificates of Status				
		•		
Special Instructions to I	Filing Officer:	İ		

Office Use Only



900137238969

10/30/08--01017--001 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

D. BRUCE

OCT 3 1 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	CT: S.H.O.K. Entertainment LL (Name of Limited Liability Company)	C				
The end	closed Articles of Amendment and fee(s) are submitted for filing.					
Please r	eturn all correspondence concerning this matter to the following:					
For furt	Henry J Cedeno (Name of Person) S. H. O. K. Entertainment (Firm/Company) 11 S. W. 1/3th Ave #101 (Address) Migmi FL 33174 (City/State and Zip Code) her information concerning this matter, please call:	SECRETARY OF STATE	FILED			
		9				
Henry Cedeno at (305) 798-0046 (Name of Person) (Area Code & Daytime Telephone Number)						
Enclose	d is a check for the following amount:					
\$25.	00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee Certificate of Certified Copy (additional copy is enclosed)	of Status & opy	losed)			

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

(Name of the Limited Liabilit (A Florida	Y Company as it now appears on or Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability of Florida document number <u>L0800009756</u>		16 / 200 8 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," th	e designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		SE TALL	
(Principal office address MUST BE A STREET ADD	RESS)	CAE a	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		30 PH 12: 19 SSEE, FLORIDA	
B. If amending the registered agent and/or registered agent and/or the new registered office add		cords, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:	(F. , F)		
	(Enter Florida street address)		
	(City)	, Florida(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 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>Address</u> <u>Title</u> Type of Action <u>Name</u> MER Henry J Cedeno □ Add Remove 🗂 Add Remove Remove ☐ Add Remove 8 ₫₫d Ramove] D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated_ Signature of a member or anthorized representative of a member

Page 2 of 2

Filing Fee: \$25.00