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SECRETARY OF STATE
DIVISION OF CORPORATION

## **COVER LETTER**

то:	Registration Se Division of Cor			•	
SUBJE	CCT:	DOONGY E	ENTERTIANMENT	Ţ	
50204	<u></u>	Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please	return all correspo	ndence concerning this matter	r to the following:		
			CONRAD AUGUSTE		
· Name of Person					
		DOON	GY ENTERTAINMEN	IT LLC	
· F			Firm/Company		
		146	5 NE 121 ST APT B3	309	
			Address		
		M	AMI / FLORIDA 3316	51	
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	<del></del>	
		CONRA E mail address:	DAUGUSTE@GMAil to be used for future annual rep	L.COM	
For fur	ther information c	oncerning this matter, please	•		
	AUGU Name o	STE, CONRAD f Person	at ( 786 )	566-1415  Daytime Telephone Number	
Enclose	ed is a check for th	ne following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is c	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
			•		
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	Registratio Division of Clifton Bu	f Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



DOONGY ENTERTAINMENT, LLC
(Name of the Limited Liability Company as it now appears on our records.)

(A I for ida Chimica L	Chaomity Compan	")	
The Articles of Organization for this Limited Liability Company	were filed on _	October 21, 2008	and assigned
Florida document number L08000098771 .			-
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company	here:	
DOONGY ENTERTAIN	IMENT GRO	UP LLC	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Cor	npany," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable:	1465 NE 1	21st Street	
(Principal office address MUST BE A STREET ADDRESS)	Apt B309		
	North Mian	ni, Fl 33161	
Enter new mailing address, if applicable:	1465 NF 1	21st Street	
(Mailing address MAY BE A POST OFFICE BOX)	Apt B309	z rat Otroot	
(muning unuress MAT BE AT OST OFFICE DOA)	North Miami, Fl 33161		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:		n our records, <u>enter th</u>	e name of the new
New Registered Office Address:			
	Enter Florida street address		ess
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	i		
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	olete performan provided for in	ce of my duties, and I an Chapter 608, F.S. Or, ij	n familiar with and this document is

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	Name	<u>Address</u>	Type of Action
MGR	Gregory L. ROBINSOI	N 437 NE 191ST APT 105 MIAMI, FL 33179	Add  Remove
	<del> </del>		Add Remove
			Add Remove
			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
D. If amer	nding any other information, en	ter change(s) here: (Attach additional sheets, if necess	ary.)
_			
 	NOVEMBER 25	, 2009	<del></del>
	Signature o	f a member or authorized representative of a member	
		CONRAD AUGUSTE  Typed or printed name of signee	
		i voca or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00