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S. WARREN AUG 1 1 2017

## **COVER LETTER**

TO:

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Div	ision of Cor	porations		
	Vision Ente	rtainment Worldwide LLC		
SUBJECT:	_	Name of Limi	ited Liability Company	<del> </del>
The enclosed	LArticles of	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter		
riease return	an correspo	ndence concerning this matter		
		RYAN BURKE	<i>⊅</i>	
			Name of Person	<del></del>
		Financial Partner Group		
			Firm/Company	
1299 Nw 40th Ave, Suite G				
			Address	
		Lauderhill, Fl 33313		
			City/State and Zip Code	<del></del>
		financialpartnergroup@gma	il.com to be used for future annual report notific	ation)
For further in	nformation c	oncerning this matter, please ca		
RYAN BUR	KE		954 918-8587 at () Area Code Daytime T	
Name of Person		f Person	Area Code Daytime	Felephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIE Registration Section Division of Corporat	

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

34.0

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## VISION ENTERTAINMENT WORLDWIDE LLC

(Name of the Limited Liability Company as it now appears on our records,

(A Florida Limit	ited Liability Company)	recorus.)
The Articles of Organization for this Limited Liability Comp	oany were filed on $\frac{11/07/2008}{1}$	and assigned
Florida document number L080000104363		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ecords, <u>enter the name of the nev</u>
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		<u> </u>
	Enter Florida street	
	Citv	, Florida
New Registered Agent's Signature, if changing Registered Age	•	54 - 25 M
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of my duti as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
11.0	Changing Registered Agent, Sign	ature of New Registered Agent
Da.	ge 1 of 3	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	DAVREN ALAN TAYLOR	25 RIDGE DRIVE	
		WESTBURY, NEW YORK 11590	□ Remove
			□ Change
		4529	Add
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ecuve date, ii otner (n:	ate must be specific an this block does not	id cannot be prior to dat meet the applicable	e of filing or more than 9 statutory filing require	0 days after filing.) ments, this date v	Pursuant to 605.02 will not be listed
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Filing Fee: \$25.00