

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

L. SELLERS

OCT 1 5 2009

Account Name : FOX & RAMUNNI, P.A.

Account Number : I20070000156

Phone : (863) 675-4646

Fax Number

: (863)675-4174

EXAMINER

AMND/RESTATE/CORRECT OR M/MG RESIGN

MDML ENTERTAINMENT, LLC

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TO:	Registration Se Division of Cor	ection Porations		•
etid ()	ect.	MDML En	tertainment, LLC	2
3U DJ !	ECT:		led Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
Michael D. Markle				
Name of Person				
MDML Entertainment, LLC Firm/Company				
, unacompany				
	1731 Red Cedar Drive Apt 7			
		_		
		Foi	rt Myers, Florida 33907 City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		m	dmarkle@gmail.com	
For fi	other information	E-mail address: ()	to be used for future annual report notifies call:	tion)
		<u>-</u>		
		hael D. Markle	at (239) 98 Area Code & Daytime T	30-4322 Elephone Number
			·	•
Enclo	sed is a check for t	the following amount:		
 ✓ \$ 2	5.00 Filing Fee	S30.00 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)
٠	Rogisi Divisi P.O. E	LING ADDRESS: tration Section on of Corporations lox 6327 tassee, FL 32314	STREET/COURIED Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

H090002192103

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>M</u> D	ML Enterta	inment, LLC		
(Name of the Limited L (A F	iability Compan Iorida Limited Li	v as it now appears ability Company)	on our records.)	
The Articles of Organization for this Limited Liab Florida document number	• -	were filed on	3/11/09	and assigned
This amendment is submitted to amend the follow	J			
A. If amending name, enter the new name of t				
The new name must be distinguishable and and with "L.L.C."	InMark Grouthe words "Limit		/," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	ole:	18441	Teleananl	h Crack Land
(Principal office address MUST BE A STREET		Alva,	FL 33	Creck Lane 920
Enter new mailing uddress, if applicable: (Mailing address MAY BE A POST OFFICE Be	_		<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered offi e address here	ice address on ou	r records, <u>enter t</u>	be name of the new
Name of New Registered Agent:	Steven	A. Ras	1 ()	100
New Registered Office Address:	Fort 1	Mers City	Florida street addi	JSO ress 3390 / Zip Code 9
New Registered Agent's Signature, if changing Re	elstered Agent:			EC. 98
I hereby accept the appointment as registered a the provisions of all statutes relative to the pro- accept the obligations of my position as registe being filed to merely reflect a change in the res company has been notified in writing of this ch	red agent as progressive existered office example.	rovided for in Cha address, I hereby o	pter 608, F.S. Or,	if this document is Indicated Indica
	Page 1	_	MANAGER VALLEY, NO.	MAIN LANGUAGE

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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>Title</u>	Name	Address	Type of Action
MGRM	Cynthia M. Infiesto	18441 Telegraph Creek Lane Alva, Florida 33920	✓ Add ☐ Remove
			Add Remove
<u>.</u>			Add Remove
			Add Remove
	***		Add Remove
			Add Remove
I	he purpose for which this Limite	hange(s) here: (Attach additional sheets, if necessared Liability Company is organized is for readorokerage and sales of industrial, commerce	<u>il</u>
<u>a</u>	nd residential real estate.		· · · · · · · · · · · · · · · · · · ·
 Dated	October 14 Signature of a me	2009 D Mall amber or authorized representative of a member	SECRE IN TALLAH SECRE
	7	Michael D. Markle yped or printed name of signes Page 2 of 2	M 8: 10 SEE FLORIDA
		Filing Fee: \$25.00	Pm O