

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSE SERVICES, LLC

Account Number : I20070000160
Phone : (800)494-3124
Fax Number : (561)455-9885

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PECEIVED 9 JUN -3 RM 2: 39 ECRETARY OF THE

STS PRODUCTIONS LLC

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S. HAWKES

JUN 4 - 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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H 690601347653

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STS PRODUCTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

| The Articles of Organization for this Limited Lia | bility Company were filed on 05/20/2009 | and assigned |
|--|---|---|
| Florida document number L09000049131 | | Fig. 3 M |
| This amendment is submitted to amend the follow | wing: | CENTRAL SECTION AND ADDRESS OF THE PARTY OF |
| A. If amending name, enter the new name of | the limited liability company here: | |
| | | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limited Liability Company," the de | signation "LLC" of the abbreviation |
| Enter new principal offices address, if applica | ble: | · |
| (Principal office address MUST BE A STREET | ADDRESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | <u></u> | |
| B. If amending the registered agent and/or registered agent and/or the new registered offi | | ds, <u>enter the name of the new</u> |
| New Registered Office Address; | | |
| | (Enter Florida street address) | |
| | | Florida |
| | (City) | (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)

H09000134765:
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 = MGRM | Manager = Managing Member | | |
|-----------------|---|--|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | | | Add Remove |
| | | | Add Remove |
| | <u> </u> | | Add |
| | . | | Add Remove |
| | | | Aed Remove |
| | | | Add Remove |
| D. If an | | er change(s) here: (Attach additional sheets, if necessary.) | |
| | Please update the Managing Memb Stacey Taylor, 7311 NE 8th Ave, Mi | per Stacy Taylor's name to Stacey Taylor. iami, FL 33138 | |
| | | | _ |
| | | | |
| Dated <u>Ju</u> | une 2nd | , 2009 | |
| | Signature of a | Story Taylor | |
| | Stacey Taylor | a pember of authorized representative of a member | |
| | Stately Taylor | Typed or printed name of signee | |

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