

L09000074916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

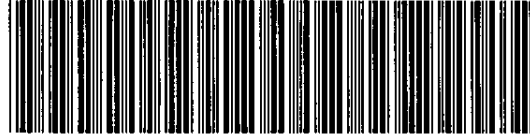
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

FILED

APR 28 2015
OFFICE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AMERICA'S PROM GUIDE, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KESHIA WHITEHURST
Name of Person
AMERICA'S PROM GUIDE, LLC
Firm/Company
72 VAN REIPEN AVENUE #156
Address
JERSEY CITY, NJ 07306
City/State and Zip Code
KESHIA.RICHMOND@PROMGUIDE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KESHIA WHITEHURST at (**800**) **775-5701 X508**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing 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)

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

FILED
 APR 20 PM 2:25
 TALLAHASSEE, FL
 DIVISION OF CORPORATIONS

AMENDED AND RESTATED ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

AMERICA'S PROM GUIDE, 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 Liability Company were filed on AUGUST 4, 2009 and assigned Florida document number L09000074916.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2637 E Atlantic Blvd #32797

(Principal office address MUST BE A STREET ADDRESS)

POMPANO BEACH, FL 33062

Enter new mailing address, if applicable:

2637 E Atlantic Blvd #32797

(Mailing address MAY BE A POST OFFICE BOX)

POMPANO BEACH, FL 33062

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

INCORP SERVICES, INC

New Registered Office Address:

17888 67TH COURT NORTH

Enter Florida street address

LOXAHATCHEE

, Florida 22470

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 605, 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

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APR 20 PM 2:25
CLERK OF DISTRICT COURT
FLORIDA

AMENDED AND RESTATED ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

AMERICA'S PROM GUIDE, LLC

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Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

INCORP SERVICES, INC.

New Registered Office Address:

17888 67TH COURT NORTH

LOXAHATCHEE

Florida 33470

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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Natalie Bales on behalf of
If Changing Registered Agent, Signature of New Registered Agent Incorp Services Inc.

FILED
2009 APR 20 PM 2:00
TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	KESHIA WHITEHURST	2637 E Atlantic Blvd #32797	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL 33062	<input type="checkbox"/> Remove
MGR	GARFIELD BOWEN	19135 US HIGHWAY 19N	<input type="checkbox"/> Add
		I-11	<input checked="" type="checkbox"/> Remove
		CLEARWATER, FL 33764	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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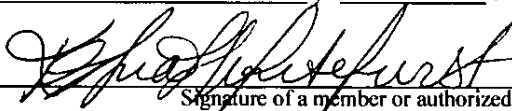
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 2017 APR 20 PM 2:25
 CLERK OF DISTRICT COURT
 1000 BANKERS BUILDING
 JACKSONVILLE, FL 32202

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated APRIL 14 2015



Signature of a member or authorized representative of a member

KESHIA WHITEHURST AKA RICHMOND

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2015 APR 20 PM 2:25
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA