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JAN 2 1 2010 EXAMINER

COVER LETTER

Division of Cor	rporations				
SUBJECT:	THE II SP	OTLIGHT L.L.C.			
Sobsect.	Name of Limit	ted Liability Company		_	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		DION BAKER			
		Name of Person			
	THE	E II SPOTLIGHT L.L.(C .		
	***************************************	Firm/Company		_	
	4430	PORTOFINO WAY #	305		
		Address			
	WEST	PALM BEACH FL, 3	3409		
		City/State and Zip Code		_	
	REVA	ALASHIN@GMAIL.CO	OM	- 250	
	E-mail address: (I	o be used for future annual repo	ort notification)	F 2 5	* ; ;
For further information of	concerning this matter, please c	all:			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DI	ION BAKER	at (_561_)	502 4933		10
Name o	of Person	Area Code &	Daytime Telephone Num	nber 교육 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등	
Enclosed is a check for t	he following amount:			* ₂₅₀ *300	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	Certification Ce	Filing Fee, ficate of Status & fied Copy tional copy is enclose	ed)

MAILING ADDRESS:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE ILSPOTLIGHT L.L.C.

(Name of the Limited Liabil (A Florid	lity Company as it now ap la Limited Liability Compa	ny)			
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on	DECEMBER 1, 20	<u>09</u> ar	nd assig	ned
This amendment is submitted to amend the following:	:				
A. If amending name, enter the new name of the li	imited liability company	here:		,	-
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Co	ompany," the designation '	'LLC" o	r the abl	oreviation
Enter new principal offices address, if applicable:			ment .	1-2	
(Principal office address MUST BE A STREET AD	DRESS)		FS	75.5	26
			4.30	n in ppen or many in order	اد الله الله الله الله الله الله الله ال
				(C)	
Enter new mailing address, if applicable:			1711	Ī	
(Mailing address MAY BE A POST OFFICE BOX)				C 5	
				ද. ා ධා	
B. If amending the registered agent and/or registered agent and/or the new registered office agent.		on our records, <u>enter</u>	the na	me of	the nev
Name of New Registered Agent:	4				
New Registered Office Address:		Enter Florida street ad	dress		
		, 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 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

Type of Action <u>Title</u> <u>Name</u> **Address** MGR **ROY COOPER** 906 SOUTH CHIPPEWA CIRCLE ✓ Add BOYNTON BEACH, FL.33436 Remove ☐ Add Remove Remove Remove ☐A'dd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 15** 2010 Dated Signature of a member or authorized representative of a member DION BAKER+ ROY COOPER Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00