## L1000005414

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SECRETARY OF STATE

J. BRYAN

DEC 23 2010

**EXAMINER** 

## **COVER LETTER**

TO:	Registration S Division of Co			OPEC 22 PH 1:40 OPEC 22 PH 1:40 SECRETARY OF STATES SECRETARY SEE, FLORIDS
		•		40 G 190
SUBJ!	ECT:	SUPERB	ARTISTS, L.L.C.	
		Name of Limi	ted Liability Company	<b>一</b>
				5572 2
70			10 GP	ror !
i ne en	iciosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	6 5 5
Please	return all corresp	ondence concerning this matter	to the following:	Jan 1
			HOLLY SPILLANE	
Name of Person		Name of Person		
		OUI	DEDD ADTIOTO ASSAULT	
		501	PERB ARTISTS AND EN	VENIS, C.C.
			т ини сопирану	
1610 CLEVELAND ST.				
			Address	
		HOLL	WOOD, FLORIDA 33020	
City/State and Zip Code				
		St. E-mail address: (1	perbartists@aol.com o be used for future annual report notifi	cation)
E C	4t !- 6 41	·	•	,
ror iur	ther information (	concerning this matter, please c	an:	
	HOL	LY SPILLANE	at ( 954 )	554-1800
Name of Person		of Person	Area Code & Daytime	
Enclos	ed is a check for t	he following amount:		
<b>\$25</b>	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee &	\$60.00 Filing Fee,
		Certificate of Status	Certified Copy (additional copy is enclosed)	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUPERB ARTISTS 1.1.C.

(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document numberL1000005414	ompany were filed on
This amendment is submitted to amend the following:	ARTES PARTO
A. If amending name, enter the new name of the limit	ited liability company here:
SUPERB ARTIS	STS AND EVENTS, L.L.C.
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	ered office address on our records, <u>enter the name of the nev</u> ress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M MGRM =	lanager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add  Remove
			— n
			Pamara
****	·····		D-maria
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets,	Ž«
			DEC 22 I
Dated	DECEMBER 17	2010 .	H 1:40
	Signature of I	oulland nember or authorized representative of a memb	er
		Holly Spillane Typed or printed name of signee	
		Typed of printed name of signee	

Page 2 of 2

Filing Fee: \$25.00