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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

DEVI M. GOOLTAR

Account Name : PLANET HOLLYWOOD INTERNATIONAL,

Account Number : 120080000100 Phone : (407)903-5513

Fax Number :

: (407)352-7310

OCT IL AND

\*\*Enter the email address for this business entity to be used for tuture annual report mailings. Enter only one email address please.

BMAIL Address: dgoolar@PlanethollyIntl.com

RECEIVED OOCT 14 PM 2:17 Georgramy of State

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OPPOSITES ATTRACT, LLC

Certificate of Status	1
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D. BRUCE

OCT 15 2010

**EXAMINER** 

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PLANET HOLLYWOOD

Fax 407352731

Oct 14 2010 01:17pm P002/004

## **COVER LETTER**

TO: Registration Secti Division of Corpo	on rations			
SUBJECT:	OPPOSITE	S ATTRACT, LLC		
	Name of Limi	ted Liability Company		<del></del>
The enclosed Articles of An	nendment and fee(s) are sub	omitted for filing.		•
Please return all correspond	ence concerning this matter	to the following:		
	· · · · · · · · · · · · · · · · · · ·	DEVI GOOLJAR		
		Name of Person		
		Firm/Company		
	605	2 TURKEY LAKE RO	AD	
		Address		
ORLANDO, FL 32819			22 8 <b>-</b> 7	
City/State and Zip Code				
	DGOOLJAR@	PLANETHOLLYWOO to be used for future annual rep	DDINTL.COM	- SEE
For further information con		·	on nonneadon)	LLAHASSEE, FLORIDA
DEVI	GOOLJAR	at (_407_)	903-5647	ATE SO
Name of P	erson	Arca Code &	903-5647 Daytime Telephone Nu	umber
Enclosed is a check for the	following amount:			
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	Cer enclosed) Cer	00 Fi)ing Fee, rtificate of Status & rtified Copy ditional 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

PLANET HOLLYWOOD

Fax 407352731

Oct 14 2010 01:18pm P003/004

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OPPOSITES A (Name of the Limited Liability Comp (A Florida Limited	ATTRACT, LLC Sany as it now appears Liability Company)	on our records.)	<u>.</u>	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L10000021242</u> .	ny were filed on	02/24/2010	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ibility company here	:		
CE US				
The new name must be distinguishable and end with the words "Lir"L.L.C."	nited Liability Compan	y," the designation "LL	" or the abbreviation	
Enter new principal offices address, if applicable:		ALL	<b>5</b>	
(Principal office address MUST BE A STREET ADDRESS)		2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S 71	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		ASSEE, FLORIDA	A E D	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on ou e <u>re</u> :	ır records, <u>enter the</u>	name of the new	
Name of New Registered Agent:			<u></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

MGR = Manager

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:

MGRM = Managing Member Type of Action <u>Name</u> Address **Title** MGR David Crabtree Ø Add □ Remove 6052 Turkey Lake Road Suite 201 Orlando, FL 32819 ☐ Add \_\_\_ Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 October 14, Dated Signature of a member or amberized representative of a member

Typed or printed name of signee
Page 2 of 2

DAVID CRABTREE, MANAGER

Filing Fee: \$25.00