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D. BRUCE
AUG 0 2 2011
EXAMINER

COVER LETTER

TO: Registration : Division of C		**************************************		
SUBJECT:	OUTLA	W INK IV, LLC	A	
	· Name of Lin	nited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:		
		David A. Netburn		
		Name of Person		
Rolnick & Netburn				
		Firm/Company		
	Ş	9734 W. Sample Road		
		Address		
	C	oral Springs, FL 33065		TI A
	to the second second	City/State and Zip Code		AUG - I OKETARY LAHASSI
	E-mail address:	reinktattoos@yahoo.co	m t notification)	
	•		i nonneanon)	PH 1: 08 OF STATE
For further information	concerning this matter, please	call:		OR OR
Da	vid A. Netburn	at (954)	346-5001	DA 31
	of Person		aytime 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 enc	losed) Certified (e of Status &
	LING ADDRESS:	STREET/CO	DURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OUTLAW INK IV, LLC		
(<u>Name of the Limite</u> (d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	····
The Articles of Organization for this Limited	Liability Company were filed on	03/01/2010	and assigned
Florida document number L1000002	22950		
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		1
(Principal office address MUST BE A STRE	ET ADDRESS)		AAR S T
			SST -
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		F STATE
			>
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter (</u>	the name of the new
Name of New Registered Agent:	David A. Netburn, Esquire	·-	
New Registered Office Address:	9734 W. Sample Road		
-	Enter Florida street address		
	Coral Springs	, Florida	33065
	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. Thereby 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Steve Santacruz	22773 State Road 7 Boca Raton, FL 33428	☐ Add ✓ Remove
<u>MGRM</u>	Empire Records and ENTERTAINMENT, LLC	22773 State Road 7 Boca Raton, FL 33428	✓ Add ☐ Remove
MBR	Cory Mitchell	22773 State Road 7 Boca Raton, FL 33428	✓ Add ☐ Remove
			Add Remove
			AddRemove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if nec	ressary.)
			TILEI 11 AUG -1 RH LI SECTETALY OF ST
Dated	July 28 ,	<u>011</u> .	RATE OF
	Signature of a member	er or authorized representative of a member	
		Steve Santacruz	
	Туре	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00