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S. HAWKES

JUN 1 0 2010

EXAMINER

COVER LETTER

Division of	Corporations	
SUBJECT:	DLDJ Event Group, LLC	
	Name of Limited Liability Company	
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
Please return all corr	respondence concerning this matter to the following:	
	Lisa Pacin	
	Name of Person	
	DLDJ Event Group, LLC Firm/Company	
	rimi/Company	
	950 Brickell Bay Drive Suite 1804	
	Address	
	Miami, FI 33131	
	City/State and Zip Code Iiplisa77@aol.com	
	E-mail address: (to be used for future annual report notification)	
For further informati	ion concerning this matter, please call:	
	Lisa Pacin at (786) 853-3500	
Na	me of Person Area Code & Daytime Telephone Number	
Encle is a check f	for the following amount:	
دے۔ [ت	e \$\int_\$30.00 \text{ Filing Fee & }\int_\$55.00 \text{ Filing Fee & }\int_\$60.00 \text{ Filing Fee & }\text{ Filing Fee & }\int_\$60.00 \text{ Filing Fee & }\int_\$60.00 \text{ Filing Fee & }\text{ Filing Fee & }\text{ Filing Fee & }	
	(additional copy is enclosed) Certified Copy (additional copy	

MAILING ADDRESS:

Registration Section

TO:

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

(Name of the Limited Liab (A Flor	illity Company as it now appears (ida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability	ty Company were filed on	3/08/2010	and assigned
Florida document numberL10000026047			FILE
This amendment is submitted to amend the following	g:	\$0.500 C	EL-9 H
A. If amending name, enter the new name of the	limited liability company here:		MII: 59
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	," the designation "L	or the abbreviation
Enter new principal offices address, if applicable:	<u> </u>		
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		r records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter	· Florida street add	ress
_		, 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

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				
<u>MGR</u>	Danielle M Fleck	7133 Bay Drive #903 Miami Beach, Fl. 33141 US	Add ✓ Remove				
MGR	Jeff A Schoenwetter	13580 SW 67 AVE Miami, Fl. 33156 US	☐ Add ☑ Remove				
MGR_	Derek J Bartoli	1441 Kingston Way Kissimmee, Fl. 34744 US	☐ Add ☐ Remove				
	- 1	hange(s) here: (Attach additional sheets, if neces.	•				
Dated		2010 ember of authorized representative of a member Lisa Pacin yped or printed name of signee					

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Filing Fee: \$25.00