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RICHARD E. STRAUGHN
MARK G. TURNER
GERALD P. HILL, II, LL.M.
BRIAN J. KNOWLES

JACK STRAUGHN (1925-2000) October 12, 2011

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE:

SPLITZ LI, LLC

Reinstatement and name change to: Pincurean Entertainment Group, LLC

Our File No.: 06891/0001

Dear Sir:

Enclosed for filing in the following order, please find the following originals:

1. Limited Liability Company Reinstatement for Splitz LI, LLC; and

2. Articles of Amendment to Articles of Organization of Splitz LI, LLC to change the company name to Pincurean Entertainment Group, LLC.

Also enclosed, is my firm's check in the total amount of \$293.75, which represents the reinstatement fee in the sum of \$238.75, as well as the amendment filing fee and certified copy charge totaling \$55.00, along with a stamped envelope for return of the copies.

Thank you for your assistance in this matter. Should you have any questions, please do not hesitate to contact me.

Sincerely yours,

STRAUGHN & TURNER, P.A.

MARK G. TURNER

MGT/djb enclosures

cc: Michael Ducat splitz.llc\fladept.reinstate&namechg pincurean.llc\fladept.reinstate&namechg

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPLITZ L		
(Name of the Limited Liability Compan (A Florida Limited Lia	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company v Florida document numberL10000065210	were filed onJune 18, 2010 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ility company here:	
PINCUREAN ENTERTAIN	NMENT GROUP, LLC	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation	nc
Enter new principal offices address, if applicable:	(SAME)	
(Principal office address MUST BE A STREET ADDRESS)	PE	
	A CO	, 1486. 1268.
Enter new mailing address, if applicable:	SAME SARY OF THE	ĭ
(Mailing address MAY BE A POST OFFICE BOX)	To D	•
	A SE	
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	fice address on our records, enter the name of the ne	w
Name of New Registered Agent:	(SAME)	
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City 7in 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 Title Name Address Type of Action ☐ Add Remove □ Add Remove Remove ☐ Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member MICHAEL DUCAT Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00