L10000067851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

N. Culligan JUL - 6 2010

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Electric Grasshopper Entertainment Florida LLC Electric Gras
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lawrence Swan
Name of Person

Caloosehatche Tax & Financial Services Inc
Firm/Company

709 Cape Coral Pkwy West
Address

Cape Coral FL 33914
City/State and Zip Code

Lawrence.swan@ctfs.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawrence Swan at (239) 540-2612
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- [x] $25.00 Filing Fee
- [ ] $30.00 Filing Fee & Certificate of Status
- [ ] $55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- [ ] $60.00 Filing Fee, 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

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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Electric Grasshopper Entertainment Florida LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/24/2010 and assigned Florida document number L10000067851.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

____

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _______________
(Principal office address MUST BE A STREET ADDRESS) _______________
____

Enter new mailing address, if applicable: _______________
(Mailing address MAY BE A POST OFFICE BOX) _______________
____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _______________

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

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
Membe	Pair, Christopher F	P O Box 100182 Denver CO 80250	☑ Add ☐ Remove
Membe	Davis, Ronald K	143 Twin Lane North Wantagh NY 11793	☑ Add ☐ Remove
MGR	Pair, Christopher F	P O Box 100182 Denver CO 80250	☐ Add ☑ Remove
MGR	Davis, Ronald K	143 Twin Lane North Wantagh NY 11793	☐ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

Dated June 29th, 2010.

Lori Jennings
Signature of a member or authorized representative of a member

Lori Jennings
Typed or printed name of signee

Filing Fee: $25.00