

L100000 72986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

B. KOHR

JUL 12 2011

EXAMINER



100209816341

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2011 JUL 12 AM 10:15
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL 12 PM 3:03



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 842001 7292882

AUTHORIZATION

COST LIMIT : \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL 12 PM 3:03

ORDER DATE : July 11, 2011

ORDER TIME : 5:28 PM

ORDER NO. : 842001-010

CUSTOMER NO: 7292882

DOMESTIC AMENDMENT FILING

NAME: AMORATI ENTERTAINMENT, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMORATI ENTERTAINMENT, LLC
Name of Limited Liability Company

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 JUL 12 PM 3:03

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

Please return all correspondence concerning this matter to the following:

MARLON A. HILL, ESQ.

Name of Person

DELANCYHILL, P.A.

Firm/Company

201 S. BISCAYNE BLVD., SUITE 2812

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

MHILL@DELANCYHILL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARLON A. HILL, ESQ.

Name of Person

at (786)

777-0184

Area Code & Daytime 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 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AMORATI ENTERTAINMENT, LLC

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

FILED STATE
SECRETARY OF CORPORATIONS
11 JUL 12 PM 3:03

The Articles of Organization for this Limited Liability Company were filed on 07/09/2010 and assigned
Florida document number L1000000072986.

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)

539 NE 10TH AVENUE

FORT LAUDERDALE, FLORIDA 33301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

539 NE 10TH AVENUE

FORT LAUDERDALE, FLORIDA 33301

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

City, Florida

Zip Code

City, Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANTHONY CAMPANALE	539 NE 10TH AVENUE FORT LAUDERDALE, FLORIDA 33301	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AMORATI MANAGEMENT	539 NE 10TH AVENUE FORT LAUDERDALE, FLORIDA 33301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	FERZA, LLC	539 NE 10TH AVENUE FORT LAUDERDALE, FLORIDA 33301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

July 11, 2011

Signature of a member or authorized representative of a member

MARLON A. HILL, ESQ.

Typed or printed name of signer

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMORATI ENTERTAINMENT, LLC
Name of Limited Liability Company

FILED STATE
SECRETARY OF CORPORATIONS
11 JUL 12 PM 3:03

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

Please return all correspondence concerning this matter to the following:

MARLON A. HILL, ESQ.

Name of Person

DELANCYHILL, P.A.

Firm/Company

201 S. BISCAYNE BLVD., SUITE 2812

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

MHILL@DELANCYHILL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARLON A. HILL, ESQ.

Name of Person

at (786)

777-0184

Area Code & Daytime 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 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