

LI 0000080422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

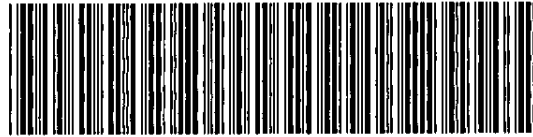
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 24 AM 11:42

FEB 27 2012  
T. HAMPTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Coolrod-Entertainment L.L.C**  
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:

**Sherard H Adams Sr**

Name of Person

**Coolrod-Entertainment L.L.C**

Firm/Company

**8362 Pines Blvd Suite 124**

Address

**Pembroke Pines FL 33024**

City/State and Zip Code

**Prince@Coolrodentertainment.com**

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

For further information concerning this matter, please call:

**Sherard H Adams Sr**

Name of Person

at ( **954** )

**681-0119**

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



RECEIVED

12 FEB 24 PM 4:00

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 2, 2012

SHERARD H ADAMS SR  
8362 PINCES BLVD  
STE 124  
PEMBROKE PINES, FL 33024

SUBJECT: COOLROD-ENTERTAINMENT..(L.L.C)  
Ref. Number: L10000080422

We have received your document for COOLROD-ENTERTAINMENT..(L.L.C). However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$60.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II

Letter Number: 412A00003894

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

Coolrod-Entertainment , , (L.L.C)

(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 08/02/2010 and assigned

Florida document number L10000080422

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MR</u>	<u>Darryl J Burroughs Sr</u>	<u>105 Feasel Drive</u> <u>Henrietta, NY 14467</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MRS</u>	<u>Adrienne M Burroughs</u>	<u>105 Feasel Drive</u> <u>Henrietta, NY 14467</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MR</u>	<u>Sherard H Adams Jr</u>	<u>8362 Pines Blvd</u> <u>Suite 124</u> <u>Pembroke Pines, FL 33024</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>Maricel S Villanueva</u>	<u>8362 Pines Blvd</u> <u>Suite 244</u> <u>Pembroke Pines, FL 33024</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Sherard H Adams Sr</u>	<u>8362 Pines Blvd</u> <u>Suite 124</u> <u>Pembroke Pines, FL 33024</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Darryl J Burroughs Jr</u>	<u>8362 Pines Blvd</u> <u>Suite 124</u> <u>Pembroke Pines, FL 33024</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

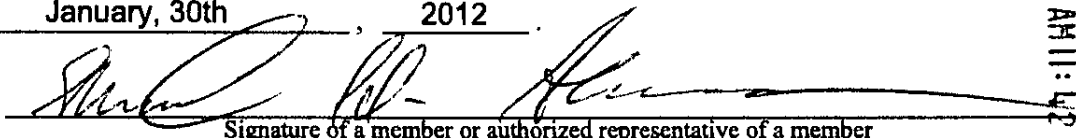
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Changing Title For three Members. From MR, To MGRM. And MRS, To MGRM

Sherard H Adams, Darryl J Burroughs Jr, Maricel S Villanueva. This Change for

these three names are solely for Title Correction. Due to take Affect A.S.A.P.

Dated January, 30th, 2012

  
Signature of a member or authorized representative of a member

Sherard H Adams Sr

Typed or printed name of signer

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