

L10000090774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

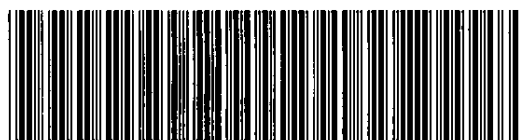
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

NOV - 2 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Blonde Events, LLC  
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:

Meaghan E. Kirby

Name of Person

Blonde Events, LLC

Firm/Company

401 E. Las Olas Blvd., Ste. 130-575

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

Meaghan.Kirby@gmail.com

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

For further information concerning this matter, please call:

Meaghan Kirby

Name of Person

at ( 954 ) 699-6934

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**Blonde Events, 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 August 27, 2010 and assigned Florida document number L100000 90774.

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)**

416 NE 13th Avenue  
Fort Lauderdale, FL 33301

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

401 E. Las Olas Blvd  
Suite 130-575  
Fort Lauderdale, FL 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:

416 NE 13th Avenue  
*Enter Florida street address*  
Fort Lauderdale, Florida 33301  
*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

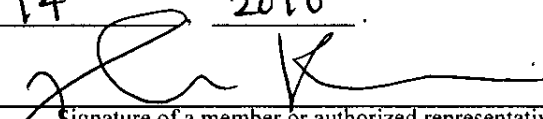
MGRM = Managing Member

Title	Name	Address	Type of Action
Mgrm	Elizabeth Tonkin	6181 Superior Blvd. Davie, FL 33331	<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
			<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.)

See attached existing  
(changing address of members)

Dated October 14 2010

  
Signature of a member or authorized representative of a member  
Meghan E. Kirby  
Typed or printed name of signee

2010 NOV 1 PM 12:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## Blonde Events, LLC

**Name of existing member:**

Meaghan E. Kirby

Christi L. Bick

**New Address:**

416 NE 13<sup>th</sup> Avenue

Fort Lauderdale, FL 33301

416 NE 13<sup>th</sup> Avenue

Fort Lauderdale, FL 33301

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