L10000116426

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SECREJARÝ J STÁTE MIT AHASSEE, FLORIDÁ

C. LEWIS
FEB 2 3 2011
XAMINED

COVER LETTER

TO: Registration Section * * Division of Corporations
SUBJECT: Red Eye Entertainment 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:
Frantzy Shawl Peralte Name of Person
Red Eye Pronofions & Extertainment UC Firm/Company
11145 SW 6th Street #303
Pembroke Pines, FL 33025 City/State and Zip Code
Fedeyeniani @ qmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shawn Feralte at 954 668-1428 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

2011 FEB 22 PK 18 18 Company as it now appears on our records AHAS The Articles of Organization for this Limited Liability Company were filed on _ Florida document number <u>L10000116426</u>. 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 City

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** <u>Name</u> <u>Address</u> Type of Action Remove □ Add Remove Add Remove ∏Add Remove \square Add ∏Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member SHAWN YELL Typed or printed name of signee

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Filing Fee: \$25.00