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B. BOSTICK

JAN 1 9 2011

EXAMINER

## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

SUBJECT: Vass		inment Limited Liak	oilthy Company
	Name of Limite	ed Liability Company	,
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspond	dence concerning this matter to	o the following:	
,		Name of Person Liabilianted Firm/Company	Corpany
	1740 Sou	th State Rol 7 i	init 305
For further information con	North Laudera Justin Vassar & E-mail address: (to	be used for future annual report notification	SEUNE IS RY ALLAHASSE
Justin Scott	Person	at (78 k) 623 - 70 Area Code & Daytime To	8 AM III S 7 elephone Number IDA
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons or Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vassacci Entertainment	Limited Liability	Company		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Of Florida document number <u>L 1106606 32</u> 68	Company were filed on	n 07, 2011	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company here	2:		
The new name must be distinguishable and end with the wo	ords "Limited Liability Compar	ny," the designation "LLC	or the abbreviation	
Enter new principal offices address, if applicable:		TAL		
(Principal office address MUST BE A STREET ADD	RESS)	28	5	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		ASSEE. FLORIDA	æ ;	
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:		ur records, enter the	name of the new	
New Registered Office Address:	Ento	er Florida street address	5	
		, Florida		
<del></del>	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** <u>Name</u> Address **Type of Action** Justin Scott Vassar Remove Remove \_ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary \( \operatorname{\operatorname{Attach}} \) Signature of a member or authorized representative of a member Tustin Scott Vassant
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00