

L110000018575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

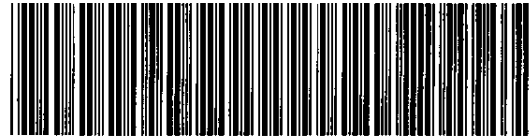
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

MAY 24 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SIMPLE WEDDINGS & EVENT PLANNING 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:

SANDY LOUIS
Name of Person
PINNACLE ENTERPRISE & COMMERCE CORP
Firm/Company
5171 NW 159 ST, UNIT E
Address
MIAMI LAKES, FL 33014
City/State and Zip Code
simpleweddings11@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SANDY LOUIS at (**305**) **923-4518**
Name of Person 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

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TALLAHASSEE, FLORIDA

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

SIMPLE WEDDINGS & EVENT PLANNING 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 02/14/2011 and assigned Florida document number L11000018575.

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)

19821 NW 2ND AVE
SUITE 368
MIAMI GARDENS, FL 33169

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19821 NW 2ND AVE
SUITE 368
MIAMI GARDENS, FL 33169

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TALLAHASSEE, FLORIDA

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:

SANDY LOUIS

New Registered Office Address:

5171 NW 159 ST, UNIT E

Enter Florida street address

MIAMI LAKES

, Florida

33014

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>
MGRM	DAPHNIE A ST LOUIS	19360 NE 1ST CT MIAMI FL 33179	<input type="checkbox"/> Add <input checked="" 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.)

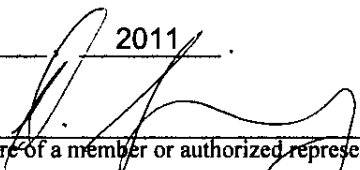
PLEASE UPDATE MGRM PINNACLE ENTERPRISE & COMMERCE CORP
 ADDRESS TO 5171 NW 159 ST, UNIT E MIAMI LAKES, FL 33014.

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2011 MAY 23 PM 2:27

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Dated JULY 19 2011


 Signature of a member or authorized representative of a member
JAQUETTA R. SPRY
 Typed or printed name of signee