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SECRETARY OF STATE DIVISION OF CORPORATIONS

MAR 1 9 2012 T. **HAMPTON**

COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	POND 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:				
	Ana Band Name of Person Bond Enter Fainment Firm/Company 4635 Royal Palm Ave. Address Hiami Beach FC 33140 City/State and Zip Code anam COND Og mail. COM				
	E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: According to the second					
Enclosed is a	check for the following amount: ing Fee \$\int \\$30.00 \text{Filing Fee & }\int \\$55.00 \text{Filing Fee & }\int \\$60.00 \text{Filing Fee,} \text{Certificate of Status & }\int \text{Certified Copy }\int \text{(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

BOND FO		INMENT, LLC	
(<u>Name of the Limited L</u> (A F	iability Compan Iorida Limited Lia	y as it now appears on our records ability Company)	.)
The Articles of Organization for this Limited Liab Florida document number LII 0000	bility Company v 67641	were filed on June 9,20	R 16
This amendment is submitted to amend the follow	ving:		OF STATEONS OF STATEONS PH 12: 22
A. If amending name, enter the new name of t	<u>he limited liabil</u>	ity company here:	15 No.
			1.
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>		
B. If amending the registered agent and/or registered agent and/or the new registered office			ter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	_/_	Enter Florida street	t address
		, Florid	
		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>	Type of Action
GRI	1 Derek B	OND 4635 hoyal Palm Ave Mi'ami Beach, FC	Add Remove
 			Add Remove
***************************************			Add Remove
			AddRemove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
-1/-1	- ,		AddRemove
D. If am	ending any other informat	ion, enter change(s) here: (Attach additional sheets, if ne	cessary.)
			SECRET DIVISION C
			F CORF
			ILED SINIE RY OF SINIE CORPORATIONS
Dated	03/12	<u>2012</u> .	ONS 22
	Sign	iathre of a member or authorized representative of a member	
		Typed or printed name of signee	\$\tag{\text{\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex

Page 2 of 2

Filing Fee: \$25.00