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COVER LETTER

TO:

Registration Section

Division of	Corporations	•	
SUBJECT:	THE LICK T	HE DRAMA SERIES	
		ited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	espondence concerning this matte	r to the following:	
		Christopher Fraser	
	 	Name of Person	
		V SERIES THE LICK Firm/Company	
	3	3291 JAVA PLUM AVE Address	
		MIRAMAR FL 33025	2012 HA
		City/State and Zip Code	26
For further information	E-mail address: on concerning this matter, please	IESTHELICK@GMAIL.COM (to be used for future annual report notification call:	
OUD	10701150 504050	. =00	1
	ISTOHER FRASER ne of Person	at (786) 203 Area Code & Daytime Tel	3-3976 ephone Number
Enclosed is a check fo	or 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)
	AILING ADDRESS: gistration Section	STREET/COURIER A Registration Section	ADDRESS:
Div P.O	ision of Corporations Box 6327 hahassee, FL 32314	Division of Corporation Clifton Building 2661 Executive Center	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE LICK	THE DRAMA SER	IES		
(Name of the Limited Liabil) (A Florid	ity Company as it now appea a Limited Liability Company)	rs on our records.		
The Articles of Organization for this Limited Liability	Company were filed on	11/18 / 2011	and as	ssigned
Florida document number <u>L11000131616</u>	·			
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the li</u>	mited liability company he	<u>re</u> :		
	RIES THE LICK.LLC			
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Comp	any," the designation "LL	C" or the	abbreviatio
Enter new principal offices address, if applicable:				
enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADI	nDECC)	™ lgt Note	. ~	
Frincipai office utitiress MUST BE A STREET ADI			<u> </u>	
	<u> </u>	nda 1 ° Year on 1		
		عقر ون تاکاری	26	Aprilements.
Enter new mailing address, if applicable:	<u></u>	199 - 40 1993 - 1993 1994 - 1995 1995 - 1995	- TO	
Mailing address MAY BE A POST OFFICE BOX	· · · · · · · · · · · · · · · · · · ·	<u> </u>		T.
		97A	<u> </u>	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		our records, <u>enter the</u>	e name	of the ne
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:				
	Er	iter Florida street addre	SS	
		, Florida	, Florida	
	City		Zip Coo	te

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 | <u>Address</u> **Type of Action** 3291 Java Plum Ave Miramar Fl 33025 Add MGRM Pat Longworth ✓ Remove 3291 Java Plum Ave Miramar Fl 33025 Add MGRM_ Christopher Fraser ☐ Remove ☐ Add Remove Remove \square Add Remove **∏**Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 3/6/2012 Signature of a member or authorized representative of a member Christopher Fraser
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00