# LIZOUSPHS

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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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(Document Number)		
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# **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: EVENT INTERNATIONAL MARKETING, 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:				
SHERRIE FENRIC	СН			
Name of Person				
EVENT INTERNATIONAL MAR	RKETING, LLC			
Firm/Company				
PO BOX 1485				
Address				
VIRGINIA BEACH, VA 23451				
City/State and Zip Code  Sheriff Code  E-mail address: (to be used for future annual	ich o a mail com			
For further information concerning this matter, please call:	V			
Sherrie-Fenrich Name of Person  at 757 Area Coo	633-2831 de & Daytime Telephone Number			
Enclosed is a check for the following amount:				
\$\sumset\$\	Certificate of Status &			

### 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

EVENT INTERNATIONA	AL MARKETING, LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
(	3/20/2012
The Articles of Organization for this Limited Liability Company	
Florida document number L12 CC 38 43 L	2000038943
<del> </del>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	PO BOX1485
(Mailing address MAY BE A POST OFFICE BOX)	VIRGINIA BEACH, VA 23451
B. If amending the registered agent and/or registered office address here	
Name of New Registered Agent:	7 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
New Registered Office Address:	The second secon
	Enter Florida street address
<del></del>	City , Florida
New Registered Agent's Signature, if changing Registered Agent:	>. ©w <b>a</b> ,

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add Remove	
			Add Remove	
			Add Remove	
D. If amei	nding any other information, enter cha	nge(s) here: (Attach additional sheets, if necessar	y.) 	
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-				
Dated	Skennik	Carterel March 26	,2012	
	_	oer or authorized representative of a member  SCOUNT FORD SHERRE FREE FREE FREE FREE FREE FREE FREE	<u>enrich</u>	

Page 2 of 2

Filing Fee: \$25.00