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COVER LETTER

TÓ:	Registration Sect Division of Corpo			
SUBJE	ECT:	BriRoxxx E	ntertainment, LLC	
3 02 02		Name of Limi	ted Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	dence concerning this matter	to the following:	
			Alexandria Mulino	
			Name of Person	
			Firm/Company	PALLAHASSE
70		700	SW 78th Avenue #206	
			Address	
Pla		Antation, Florida 33324 City/State and Zip Code	©# 63	
		str	mkr2010@gmail.com	
For fun	ther information as	E-mail address: (i ncerning this matter, please c	o be used for future annual report noti	fication)
roi iui				
	brian Name of 1	n berkenfeld Person	at (786) Area Code & Daytin	449-6227 ne Telephone Number
				•
Enclos	ed is a check for the	following amount:		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	✓\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division	NG ADDRESS: tion Section of Corporations	STREET/COUR Registration Secti Division of Corpo	on
	P.O. Box Tallahas	k 6327 see, FL 32314	Clifton Building 2661 Executive C	enter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BriRoxxx	Entertainment, LL	.C			
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now apper Limited Liability Company)	ars on our records.)	•	_	
· ·	, , ,				
The Articles of Organization for this Limited Liability	Company were filed on	July 24, 2012	an	d assig	ned
Florida document number L12000095256	 -				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company he	e <u>re</u> :			
The new name must be distinguishable and end with the wo	ords "Limited Liability Comp	oany," the designation	"LLC" or	r the abl	breviation
b.b.c.	•		$\sum_{i=1}^{n}$	% 12	
Enter new principal offices address, if applicable:			<u> </u>	2 —	
(Principal office address MUST BE A STREET ADD	RESS)	,	HASSEY	$\frac{\omega}{\omega}$	
				<u> </u>	
			ب الله (100)	3	III
Enter new mailing address, if applicable:			ES.	SP	
(Mailing address MAY BE A POST OFFICE BOX)			Žini.	99	
B. If amending the registered agent and/or regi		our records, enter	r the na	me of	the new
registered agent and/or the new registered office ad-	<u>dress here</u> :				
Name of New Registered Agent:				<u> </u>	
New Registered Office Address:					
	E	Inter Florida street a	ddress		
		, Florida			
_	City			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, <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
mgrm	Alexandria Mulino	700 SW 78th Avenue Apt 206 Plantation, FL 33324	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Refnove
	***************************************		Remove
			Add Remove
D. If amen	ding any other information, enter o	change(s) here: (Attach additional sheets, if necessar	y.)
_			
_			
Dated	October 22	2012 .	
	Signature of a n	nember or authorized representative of a member	
		Brian Berkenfeld	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00