

L13000152333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

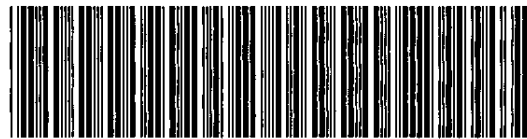
(Business Entity Name)

(Document Number)

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2013 DEC 17 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 18 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **DISTORTION CONCERTS 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:

STEPHANE MINIER

Name of Person

DISTORTION CONCERTS LLC

Firm/Company

1949 LAZY OAKS LOOP

Address

SAINT CLOUD FL 34771

City/State and Zip Code

stephane@distortionconcerts.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

stephane minier

Name of Person

at (**407**) **433-6196**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 DEC 17 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 5, 2013

STEPHANE MINIER
1949 LAZY OAKS LOOP
ST CLOUD, FL 34771

SUBJECT: DISTORTION CONCERTS LLC
Ref. Number: L13000152333

We have received your document for DISTORTION CONCERTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can't file this amendment to change the effective date. You can only change that through Articles of Correction and within 30 days.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 613A00025768

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

DISTORTION CONCERTS 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 OCT 29TH 2013 and assigned
Florida document number L13000152333.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

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

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TALLAHASSEE, FLORIDA

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	stephane minier	1949 lazy oaks loop	<input checked="" type="checkbox"/> Add
		saint cloud fl 34771	<input type="checkbox"/> Remove
MGRM	judine simpson	1949 lazy oaks loop	<input checked="" type="checkbox"/> Add
		saint cloud fl 34771	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
mgr	stephane minier	1949 lazy oaks loop	<input type="checkbox"/> Add
		saint cloud fl 34771	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

missed typed the active date, it should be october 29th 2013 not november

Dated oct 30th

2013

Signature of a member or authorized representative of a member

STEPHANE MINIER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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