L13000160854

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2015 DEC 31 PH 3: 14

COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	Latin Entert	ainment Group LLC		
sember.		Name of Limi	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	,
		STEPHANIE BESTULCH	ſ	
			Name of Person	,
		CEBALLOS, CEBALLOS	, BESTULICH & PADRON, LLC	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		890 SOUTH DIXIE HIGH	WAY	·
		-	Address	
		CORAL GABLES, FL 331	46	
			City/State and Zip Code	
		SBESTULICH@CCBP-CP		
		E-mail address: (1	to be used for future annual report notifi	ication)
For further in	nformation co	ncerning this matter, please ca	ul:	
STEPHANI	E BESTULIO	CH	305 381-0825	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:	,	
□ \$25.00 F	iling 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

ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION 2015 DEC 31 PM 3: 14

LATIN ENTERTAINMENT GROUP 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 Liabi	ility Company were filed on	11/15/2013	and assigned
Florida document number L13000160854			
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company h	ere:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>	····	
			······································
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address of e address here:	n our records, <u>ent</u>	er the name of the ne
Name of New Registered Agent:	CEBALLOS, CEBALLOS, BES	TULICH & PADRON	I, LLC
New Registered Office Address:	890 SOUTH DIXIE HIGHWAY		
	Enter Flo	rida street address	
	CORAL GABLES	, Florida	33146
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ROJAS, SARA	3300 NE 191ST STREET	□ Add
		PARK CENTRAL	■ Remove
		AVENTURA, FL 33130	Change
			☐ Remove
			Change
		**************************************	□ Add
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an effective date is listed to listed to the lister of the date insertions.	d, the date must be spec ted in this block doe	ific and cannot s not meet the	be prior to date applicable sta	of filing or more tutory filing re	han 90 days a quirements, t	ter filing.) Pur his date will	rsuant to 605.0 not be lister	0207 (3)(b d as the
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Typed or printed name of signee

Filing Fee: \$25.00