# L14000004459

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JAN 24 2017 S. YOUNG

SECRETARY OF STATE
TALLAHASSEE, ELORIDA

# **COVER LETTER**

SUBJECT:  CHANDELIER ENTERTAINMENT 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:	
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:	
DEBORAH MARTINEAU	
Name of Person	
CHANDELIER ENTERTAINMENT	
Firm/Company	
17531 SW 12TH STREET	
Address	33
PEMBROKE PINES, FL 33029	品品
City/State and Zip Code	SECRETARIASSEE, FLORIDA
chandelierentertainment@gmail.com  E-mail address: (to be used for future annual report notification)	me
PEMBROKE PINES, FL 33029  City/State and Zip Code  chandelierentertainment@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	COPUD
DEBORAH MARTINEAU  954 at ( )	373
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\begin{array}{c} \Boxed{1} \$30.00 Filing Fee & \Boxed{2} \$55.00 Filing Fee & \Boxed{2} \$60.00 Filing Fee, \\ Certificate of Status & \Boxed{2} \$\text{Certified Copy (additional copy is enclosed)} \\ \end{array}\$ Certified Copy (additional copy is enclosed)	

## MAILING ADDRESS:

TO:

**Registration Section** 

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

CHANDELIER ENTERTAINMENT		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  Articles of Organization for this Limited Liability Company were filed on 1/19/2014 and assigned da document number 1/14000004459  amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  are name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or new principal offices address, if applicable:    A	and assigned	
orida document number L14000004459  his amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  It is new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  Inter new principal offices address, if applicable:		
A. If amending name, enter the new name of the limited liab	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  es of Organization for this Limited Liability Company were filed on   L14000004459  diment is submitted to amend the following:  Inding name, enter the new name of the limited liability company here:  Inding name, enter the new name of the limited Liability Company," the designation "LLC" or the abbreviation "LLC."  In principal offices address, if applicable:  Inding address MUST BE A STREET ADDRESS)  In mailing address, if applicable:  Inding address, if applicable address on our records, enter the name of the new agent and/or the new registered office address here:	
	11.	
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	SEGRETARY OF TALL AHASSEE.
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>enter t</u> e:	he name of the new
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 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	<b>Type of Action</b>
MGR	DEBORAH MARTINEAU	17531 SW 12TH ST	
		PEMBROKE PINES, FL 33029	☐ Remove
			■ Change
AMBR	CLAUDENETTE FRASER	3301 JAVA PLUM AVE	□ Add
	<del></del>	MIRAMAR, FL 33025	□ Remove
			☐ Change ☐ Add
<u></u>			ALVANIA SECRETARIA SEC
			Response Same
			PA Change
			Add
			Remove
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			Change

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Filing Fee: \$25.00