

L14 0000 92133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 JAN 12 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 22 2015

2ms

MIAMI NIGHT'S ENTERTAINMENT, LLC

6251 N W 1ST AVENUE
MIAMI FL 33150

AFFIDAVIT

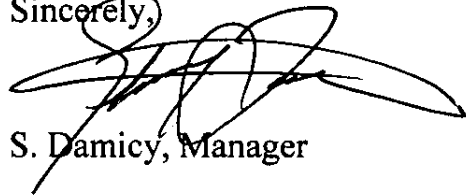
December 17, 2014

To whom it may concern:

This letter/Affidavit hereby certifies that MIAMI NIGHT'S ENTERTAINMENT, LLC, HAS NO INTENTION OF REINSTATING THE ABOVE NAMED CORPORATION AND RELEASES ANY HOLD ON THE CORPORATE NAME MIAMI NIGHT'S ENTERTAINMENT, LLC.

Therefore, we release the name for use to another entity.

Sincerely,



S. Damicy, Manager

15 JAN 12 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Ms. Sherly Damicy, being sworn, depose and say that I am the manager and director of Miami Nights Entertainment, LLC herein, or that I am authorized to sign on behalf of the owner and applicant herein I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.

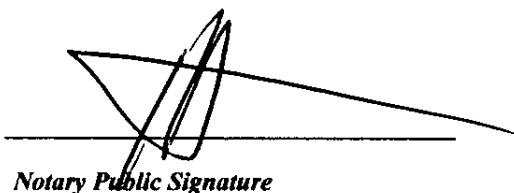
STATE OF FLORIDA }

COUNTY OF MIAMI-DADE }

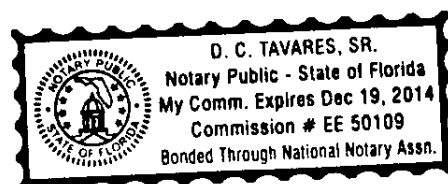
Sworn to and subscribed before me on this 18 day of December, 2014 who is personally known to me _____ whose identity I proved on the basis of:

Type of State Identification: 052078 84778-1

(Seal)



Notary Public Signature





FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2014

S DAMICY
6251 NW 1ST AVE
MIAMI, FL 33150

SUBJECT: MIAMI NIGHT'S ENTERTAINMENT HOLDING, LLC
Ref. Number: L14000092153

We have received your document for MIAMI NIGHT'S ENTERTAINMENT HOLDING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00026526

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MIAMI NIGHT'S ENTERTAINMENT HOLDING, 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:

S. DAMICY

Name of Person

MIAMI NIGHT'S ENTERTAINMENT, LLC

Firm/Company

6251 N W 1ST AVENUE

Address

MIAMI FL 33150

City/State and Zip Code

MIAMINIGHTSENT@YAHOO.COM

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

For further information concerning this matter, please call:

S. Damicy

954 940-8141

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

MIAMI NIGHT'S ENTERTAINMENT HOLDING,LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MANNERS, TRAVIS	6251 NW 1ST AVENUE	<input type="checkbox"/> Add
		MIAMI FL 33150	<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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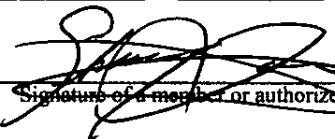
15 JAN 12 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated DECEMBER 2, 2014



Signature of a member or authorized representative of a member
S. DAMICY

Typed or printed name of signee

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TALLAHASSEE, FLORIDA