

L14 000 126 07 2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

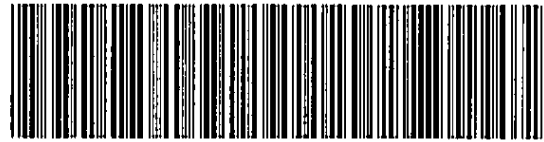
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700367429257

08/17/21 -- 0.012 -- 0.00 -- \$0.00

2021 AUG 13 AM 11:03

FILED

CUS  
Nicole chg

AUG 21 2021

1 ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Night Life 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:

NED JOSEPH  
Name of Person

Night Life Entertainment LLC  
Firm/Company

220 S.W. 56<sup>th</sup> AVE Apt. 102  
Address

Margate, FL, 33068  
City/State and Zip Code

ned159@gmail.com  
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NED JOSEPH at ( 954 ) 803-2307  
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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2021

NED JOSEPH  
220 SW 56TH AVE  
APT. 102  
MARGATE, FL 33068

SUBJECT: NIGHT LIFE ENTERTAINMENT LLC  
Ref. Number: L14000126072

We have received your document for NIGHT LIFE ENTERTAINMENT LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$1071.25.

You failed to enclosed the check for the reinstatement with the form.

The document must also contain the address of the registered agent which must be at a Florida street address.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 521A00018558



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 8, 2021

NED JOSEPH  
220 SW 56TH AVE  
APT. 102  
MARGATE, FL 33068

SUBJECT: NIGHT LIFE ENTERTAINMENT LLC  
Ref. Number: L14000126072

We have received your document for NIGHT LIFE ENTERTAINMENT 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 above listed entity is Inactive and must file the reinstatement before this document can be filed. The total amount due to reinstate is \$1,071.25.

Please return 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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 821A00015626



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 AUG 13 AM 8:04

July 7, 2021

NED JOSEPH  
220 SW 56TH AVE  
AOT 102  
MARGATE, FL 33068

SUBJECT: NIGHT LIFE ENTERTAINMENT LLC  
Ref. Number: L14000126072

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

There is a balance due of \$25.00.

PLEASE COMPLETE THE ATTACHED AMENDMENT FORM TO CHANGE NAME OF ENTITY, SINCE CURRENT NAME IS UNAVAILABLE AND RETURN TO OFFICE WITH PAYMENT. REINSTATEMENT WILL BE COMPLETED ONCE NAME CHANGE HAS BEEN RECEIVED.

Please return 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) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 121A00015495

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2021 AUG 13 AM 11:03

Night Life Entertainment 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 08/11/2014 and assigned  
Florida document number L 14000126072.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Night Lyfe Entertainment LLC

The new name must be distinguishable and contain 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)

220 SW 56th AVE Apt. 102  
Margate, FL 33068

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

220 SW 56th AVE Apt. 102  
Margate, FL 33068

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 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

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

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

[illegible]

F. Effective date, if other than the date of filing: 03/11/2014 (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 6/02/2021 2021



Signature of a member or authorized representative of a member

NED JOSEPH

Typed or printed name of signee