# 114800126534

(Red	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Doc	cument Number)			
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
·				

Office Use Only



500263030865

AUG 25 2014

T CLINE

500263030865 08/22/14--01024--006 \*\*25.00

SCIPE IARY OF STATE

IN AUG 22 AH ID: 50

#### **COVER LETTER**

**TO:** Registration Section

**Division of Corporations** 

### SUBJECT: 3 CROWNS ENTERTAINMENT, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

## **JAMES ANDREW WYATT**

Name of Person

#### 3 CROWNS ENTERTAINMENT, LLC

Firm/Company

# 709 132<sup>ND</sup> ST CIR NE

Address

#### **BRADENTON, FL 34212**

City/State and Zip Code

#### **LEGAL@MACTIVOS.COM**

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

For further information concerning this matter, please call:

JAMES ANDREW WYATT at (941) 524-7350

Name of Person Area Code Daytime Telephone Numbers

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

#### **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 ARTICLES OF ORGANIZATION OF

#### 3 CROWNS 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 8/12/214 and assigned Florida document number L14000126534.

This amendment is submitted to amend the following:

A. Amending the Managers or Authorized Member (The title, name, and address of each Manager or Authorized Member being added or removed from our records):

MGR = Manager

TITLE	NAME	ADDRESS	TYPE OF ACTION
MGR	HARRIET KALIS	3614 101 <sup>ST</sup> AVE EAST PARRISH, FL 34219	REMOVE

Signature of a member or authorized representative of a member

JAMES ANDREW WYATT
Typed or printed name of signee

Filing Fee: \$25.00