

LF5000074819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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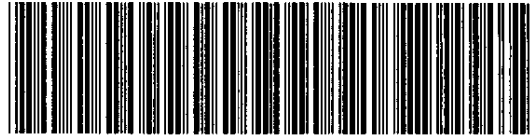
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 29 2015  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DEFINED 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:

ROSE WARNER  
Name of Person  
DEFINED ENTERTAINMENT, LLC  
Firm/Company  
2316 S.E. 1ST STREET  
Address  
BOYNTON BEACH, FL 33435  
City/State and Zip Code  
info@definedentertainment.biz  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSE WARNER at (561) 292-2672  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing 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

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15 JUN 26 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

(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 4/28/2015 and assigned Florida document number L15000074819.

This amendment is submitted to amend the following:

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

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)

2316 S.E. 1ST STREET  
BOYNTON BEACH, FL 33435

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2316 S.E. 1ST STREET  
BOYNTON BEACH, FL 33435

**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:

ROSE WARNER

New Registered Office Address:

2316 S.E. 1ST STREET  
Enter Florida street address  
BOYNTON BEACH, Florida 33435  
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.

Rose Warner  
If Changing Registered Agent, Signature of New Registered Agent

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JUN 26 5 13 43  
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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
MGR	SCOTT J. FRYBARGER	800 SILKS RUN	<input type="checkbox"/> Add
		SUITE 1345	<input checked="" type="checkbox"/> Remove
		HALLANDALE BEACH, FL 33009	<input type="checkbox"/> Change
MGR	ROSE WARNER	2316 S.E. 1ST STREET	<input type="checkbox"/> Add
		BOYNTON BCH, FL 33435	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF COURT  
JUL 26 2011

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

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (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**

JUNE 22, 2015

*Rose Warner*  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

ROSE WARNER  
Typed or printed name of sign

Typed or printed name of signee

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