115000099740

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400279802224

12/11/15--01025--008 **30.00

2015 DEC 11 A 11: 56
SECRETARY OF STATE
SECRETARY OF STATE

TETO

DEC 1 4 2015

3 MASON

COVER LETTER

TO: Registration S Division of Co			
	Entertainment, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Jason Denning		
1		Name of Person	
		Firm/Company	
	4260 Fanny Bass Rd		
		Address	
	Saint Cloud, FL 34772		
		City/State and Zip Code	
	jden49@gmail.com		
For further information of	E-mail address: (concerning this matter, please ca	to be used for future annual report notif	ication)
Jason Denning		321 443-3650 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aim High Entertainment, LLC		
(<u>Name of the Limited Liahi</u> (A Florid	lity Company as it now appears o da Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability of Florida document number L15000099740		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here	:
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	stered office address on o	ur records, enter the name of the new
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registere	•	·
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	complete performance of my agent as provided for in Cha ed office address, I hereby o	duties, and I am familiar with and upter 605, F.S. Or this document is

Page 1 of 3

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

er erten entret gegeben gerichte bereite bereite betreite betreite betreite betreiten er er er er er

A to the same of t

<u>Title</u>	<u>Name</u>	Address		Type of Action
MGR	Steve Wineriter	1417 Danbery Parks Dr		🖼 Add
		Keller, TX 76248		Remove
				□ Change
			<u></u>	🗅 Add
				Remove
				Change
				Add
				Remove
				Change
***************************************				□ Add
				Remove
				Change
				Add .
			2015 DEC	Remove
			RY C	_ Change
			A II: 56 PESTATE FLORIDA	_ Remove
			-	☐ Change

					_			
					· -			
				_		<u>.</u>		
_								
-								
		· · ·						
		<u> </u>						
_								
					<u></u>			
	<u> </u>	······			<u>.</u>			
fective	e date, if other than tive date is listed, the date	the date of filir	ig:	o date of filing or m	ore than 90 days	optional after filin	l) g.) Pursua	ant to 605.02
m effect	the date inserted in this	s block does not	meet the applica	ble statutory filing	g requirements	, this dat	e will no	ot be listed a
ote: If	t's effective date on the	e Department of	State 3 records.					
ote: If	t's effective date on the							
ote: If cumen	rd specifies a dela	yed effective	date, but not	an effective t	ime, at 12:0	01 a.m	. on th	e earlier
ote: If ocumen e recoi		yed effective record is filed	date, but not	an effective t	ime, at 12:0)1 a.m	. on th	e earlier
ote: If cumen recoi The 9	rd specifies a dela Oth day after the r	record is filed	l .		ime, at 12:0	01 a.m	. on th	e earlier
ote: If ocumen e recor The 9	rd specifies a dela	record is filed	l .		ime, at 12:0	01 a.m		e earlier
ote: If ocumen recor The 9	rd specifies a dela Oth day after the r	record is filed	. <u>2015</u>			· · · · · · · · · · · · · · · · · · ·	2015	e earlier
ote: If ocumen recor The 9	rd specifies a dela Oth day after the r	record is filed	, 2015 Can member or author	rized epresentative		· · · · · · · · · · · · · · · · · · ·		e earlier
ote: If ocumen e recor The 9	rd specifies a dela Oth day after the r	record is filed	$\frac{20(5)}{2000}$ a member or author			a. SECRETARY OF STATE	2015	- 11

Filing Fee: \$25.00