

216 0000 13570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

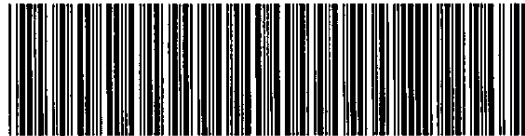
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 29 2016  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ELIZABETH ORANGE EVENTS, 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:

CHRISTOPHER A. DISCHINO

\_\_\_\_\_  
Name of Person

DISCHINO & COMPANY, PLLC

\_\_\_\_\_  
Firm/Company

4770 BISCAYNE BOULEVARD, SUITE 1280

\_\_\_\_\_  
Address

MIAMI, FL, 33137

\_\_\_\_\_  
City/State and Zip Code

CHRISTOPHER@DSMIAMI.COM

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

For further information concerning this matter, please call:

CHRISTOPHER DISCHINO                      786              581-2542  
\_\_\_\_\_  
Name of Person                      at (\_\_\_\_\_)              Daytime Telephone Number  
Area Code

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

ELIZABETH ORANGE EVENTS, 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 JANUARY 22, 2016 and assigned  
Florida document number L16000013530.

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)**

4770 BISCAYNE BOULEVARD, SUITE 1280

MIAMI, FL 33137

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

4770 BISCAYNE BOULEVARD, SUITE 1280

MIAMI, FL 33137

**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:

DISCHINO & SCHAMY, PLLC

New Registered Office Address:

4770 BISCAYNE BOULEVARD, SUITE 1280

*Enter Florida street address*

MIAMI

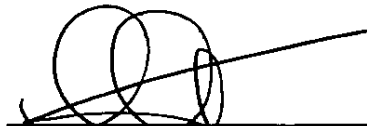
, Florida 33137

*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**

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	ELIZABETH S. EISENBERG	4770 BISCAYNE BOULEVARD	<input type="checkbox"/> Add
		SUITE 1280	<input type="checkbox"/> Remove
		MIAMI, FL 33137	<input checked="" type="checkbox"/> Change
MGR	ELIZABETH MAY	4770 BISCAYNE BOULEVARD	<input type="checkbox"/> Add
		SUITE 1280	<input type="checkbox"/> Remove
		MIAMI, FL 33137	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 JUL 2011  
AM 11:40  
Change  
Add  
Remove  
Change

[illegible]

(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)

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 JULY 22, 2016

X ELIZABETH MAY Elizabeth May  
Typed or printed name of signee

Typed or printed name of signee

**Filing Fee: \$25.00**

FILED  
16 JUL 27 AM 7:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA