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COVER LETTER

TO:	Registration S Division of Co						
CHDI		=	,	•			
SUBJ	Name of Limited Liability Company						
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	e return all correspo	ondence concerning this matter	to the following:				
		CAROLINA ESPINEL					
			Name of Person				
KAROL QUEEN PROMOTIONS LLC Firm/Company							
	Division of Corporations KAROL QUEEN PROMOTIONS LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. Ease return all correspondence concerning this matter to the following: CAROLINA ESPINEL Name of Person KAROL QUEEN PROMOTIONS LLC Firm/Company 11525 SW 47 TERRACE Address MIAMI, FL 33165 City/State and Zip Code ESPINELCAROLINA@HOTMAIL.COM E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: AROLINA ESPINEL Name of Person Area Code Daytine Telephone Number Telephone Number Area Code Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate Copy						
11525 SW 47 TERRACE							
			Address				
		MIAMI, FL 33165					
		 	City/State and Zip Code				
ESPINELCAROLINA@HOTMAIL.COM							
		E-mail address: (to be used for future annual report not	ification)			
For fu	rther information of	concerning this matter, please ca	all:				
CAR	OLINA ESPINEL						
	Name o	of Person	Area Code Daytin	ne Telephone Number			
Enclos	sed is a check for t	he following amount:					
= \$2	25.00 Filing Fee	-	Certified Copy	Certificate of Status &			

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

KAROL QUEEN PROMOTIONS 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 $\frac{05/11/2016}{}$ and assigned Florida document number _L16000092336 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	LENNI LEONARDO CARRIZO Z	11525 SW 47 TERRACE	⊟ Add
		MIAMI, FL 33165	□ Remove
			Change
			Add
			Remove
		 	□ Change
***************************************			□ Add
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o. II ami	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effecti	ive date, if other than the date of filing: O5/20/2016 (optiona) (optiona) (ective 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 6	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 linent's effective date on the Department of State's records.	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	flier of:
	7/22/2017	
Dated	1/20/ 2011	
	Tare	
	Signature of a member of authorized representative of a member	
	Carolina Espine	

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Filing Fee: \$25.00