

216000157364

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000085406 3)))



H170000854063ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FASTKIT⁴¹ CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STREET SXHOLAR ENTERTAINMENT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 MAR 28 A 11:13

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

STREET SXHOLAR 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 08/22/2016 and assigned
Florida document number LJ16000157364

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)

2598 EAST SUNRISE BOULEVARD, SUITE 210A

FORT LAUDERDALE, FLORIDA 33304

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2598 EAST SUNRISE BOULEVARD, SUITE 210A

FORT LAUDERDALE, FLORIDA 33304

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:

ANTHONY BRUNSON P.A.

New Registered Office Address:

333 LAS OLAS WAY, CU4

Enter Florida street address

FORT LAUDERDALE

Florida 33301

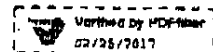
City

Zip

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.

Anthony Brunson
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	BURROUGHS INTERNATIONAL HOLDINGS, LLC	2598 EAST SUNRISE BLVD.	<input checked="" type="checkbox"/> Add
		SUITE 210A	<input type="checkbox"/> Remove
		FORT LAUDERDALE, FL 33304	<input type="checkbox"/> Change
AMBR	THE VERNON TYRONE BURROUGHS II FAMILY TRUST	POST OFFICE BOX 8045	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33310	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	VERNON BURROUGHS	PO BOX 8045	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33310	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRYANT J. DUBOSE	POST OFFICE BOX 8045	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33310-8045	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2017 MAR 28 A.M. 13
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

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

Lined area for amending information.

2017 MAR 28 A 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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 FEBRUARY 22 2017

V. Burroughs II TTEE
Signature of a member or authorized representative of a member

VERNON TYRONE BURROUGHS II, TTEE
Typed or printed name of signer