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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 72116 E'/CI 75 ATO PRODIJE CONTECTO
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ALPANA NAGAR. Name of Person
72ING EVENTS AND PRODUCTION LLC
72ING EVENTS AND PRODUCTION LLC Firm/Company 12468 SW, 121ST LANF MIAMI FLORIDA Address
MIAMI, FLORIDA 33186 City/State and Zip Code alpana. Majar @ gmail. Com E-mail address: (to be used for future drivial report polification)
E-mail address: (to be used for future definual report notification)
For further information concerning this matter, please call:
ALPANA NAGAL at 305 505 - 5231 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Certificate \text{Opy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(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

	FILED
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TALLAHA	25 PH 10: 10
· TIMA!	25 PM 10: 10

(Name of the Limited Liability Company users ton our records.)

(A Florida Company)

The Articles of Organization for this Limited Liability Company were filed on OD (20) (20) (20) and assigned Florida document number 1.17.000.04.94.5.4

This amendment is submitted to amend the following:

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

Chobe X CELL LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal office 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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

anager uthorized Member		
<u>Name</u>	Address	Type of Action
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		Remove
		Change
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		☐ Remove
		Change
		☐ Add
		Ветюче
		Change
		П Кепюче
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fan eff <u>Note:</u>	ive date, if other than the date of filing: (optional) 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 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	09/21/2018
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00