117000210242

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



200304244752

10/19/17--01015--030 *+25.00

61 W 184 CT 190 J

00T 12 2017

YILL TR

55

COVER LETTER

TO:	Registration Se Division of Cor	ction porations	P. 12	7"
		Golden Feath	ner Events, LLC	
SUBJ	ЕСТ:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			Heather Pape	
			Name of Person	
		G	olden Feather Events, LLC	
			Firm/Company	***
		i	11745 preservation LN	
			Address	
		i i	Boca Raton, FL 33498	
			City/State and Zip Code	
			eathers1886@gmail.com	
		E-mail address: ()	to be used for future annual report noti	fication)
For fu	rther information c	oncerning this matter, please ca	all:	
Heath	er Pape		561 900-8168	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 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

Golden Feather Events, LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our t ed Liability Company)	records.)
The Articles of Organization for this Limited Liability Compa Florida document number 1.17000210242	any were filed on October 11.	2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation	"E.I.C" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)		17 9
		`
B. If amending the registered agent and/or registered registered agent and/or the new registered office address be	office address on our re nere:	
Name of New Registered Agent:		49
New Registered Office Address:	Enter Florida street	
	rnier ruoradi street i	KUITEN
	City	, Florida Zin Code
Now Designated Ament's Simple of the main Designated According		гар Опи

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□ Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			CLhange
			□ Add
		75 P	. Eemove
			Change
			Add
			Remove
			Change
			🗀 Add
			□ Remove
			Change

it it is january, 1 2018, please remove completely. Thank you		
		_
		77
		:5
	~	*2.5*
	•	<u>-</u>
		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	5
		<u>.</u>
tive date, if other than the date of filing:	(optional)	
Tective date is listed, the date must be specific and cannot be prior to date of filing or mo. If the date inserted in this block does not meet the applicable statutory filing	re than 90 days after filing.) Pursu	ant to 60 at he lis
nent's effective date on the Department of State's records.	requirements, this date will be	<i>y</i> () () ()
cord specifies a delayed effective date, but not an effective ties 90th day after the record is filed.	me, at 12:01 a.m. on th	e earl
10/10/10/10/10/10/10/10/10/10/10/10/10/1		
101/2011		
Cotto CID (D)		

Page 3 of 3

Filing Fee: \$25.00