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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VIP ACCOUNTING & BUSINESS CONSULTING , LLC

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Account Number : I20100000072 Phone : (954)228-2410

Fax Number : (954)228-2411

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

Email Address:

President@Sifer.Us

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DEPARTMENT OF STATE
VISION OF CORPORATION
TALLAHASSEE, FI ORIGINAL

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Cleber Dutra Fax: (954) 228-2410	To: LLC Dissolution FL	Fax: (850) 617-8383	Page 2 of 4 04/09/2018 9:10 AM
	(((H18000	110982 3)))	18 APOLED
	ARTICLES OF A		
BUONA SERA RISTO	PRANTE, LLC		TOSEE ASTA
(<u>Na</u> m	e of the Limited Liability Comp (A Florida Limited	pany as it now appears of Liability Company)	n our records.)
The Articles of Organization for thi			
		y were 11130 on 1125 on	and assigned
Florida document number <u>∠/7(</u>	<u> </u>		
This amendment is submitted to am	end the following:		
A If omending name autom the	av nome of the limits at 11-1	L:!!:4-,	
A. If amending name, enter the n	ew name of the limited lia	ouity company here:	
AMERICAN TICKETS, LLC			
The new name must be distinguishable and	contain the words "Limited Liab	oility Company," the desig	nation "LLC" or the abbreviation "L L.C."
Enter new principal offices addre	ss, if applicable:	10425 WARRICK	ST.
(Principal office address MUST BI	E A STREET ADDRESS)	ORLANDO, FL 32	836
Enter new mailing address, if app	licable:	6499 I WERLINE	RD., S. 101
(Mailing address MAY BE A POST	•	FORT L'AUDERDA	ALE, FL 33309
	<u> </u>		
B. If amending the registered	agent and/or registered o	office address on or	ir records, enter the name of the n
registered agent and/or the new re			

Name of New Registered	Agent:		
New Registered Office Ad	draan		
New Registered Office Ad	<u> </u>	Enter Florida	street address
			Plantila
		City	, Florida 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

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