118000 108268

(Requestor's Name)
(· (545555) 5 ((d) (16)) .
(Address)
(in the state of
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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02/19/19--01029--020 **25.00

2019 FEB 19 PM 2: 36

C. GOLDEN FEB 2 3 2019

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT:	Elluminat	e Evento LL(
Souther.	Name of Limi	e Events LL(licd Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Cony	N. Beltran	
	0	Name of Person	
	Ellumina	Firm/Company	
		Firm/Company	
	3119 Whi	sper Love (n, D	
		Address	
	Winter F	City/State and Zip Code	
	E-mail address: (t	treventionail.com	ation)
For further information cor	ncerning this matter, please ca	all:	
Con W.	Bestran	at (<u>303</u>) <u>960 -</u> Area Code Daytime 3	7612
Name of F	Person	Area Code Daytime 3	Felephone Number
Enclosed is a check for the	following amount:		
\$25,00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
, ,	Certificate of Status	Certified Copy (additional copy is enclosed)	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

FILED

Elluminate Ex	onto 110	2019 FEB 19 PM 2: 36
(Name of the Limited Liability Company (A Florida Limited Lia	ability Company)	in AHASSEE, FL
The Articles of Organization for this Limited Liability Company w	vere filed on April 30	2018 and assigned
Florida document number <u>L18000107362</u> .	1	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4806 Brightma Orlando, FC 3	ur Circle
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 3	32837
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4806 Brightmon Orlando, FZ 3	Circle 32357
B. If amending the registered agent and/or registered office address here:		enter the name of the new
Name of New Registered Agent:	J	
New Registered Office Address: 4200	Brightmeur Orde Enter Florida street address	<u> </u>
Or	Enter Florida street address City City	ida 32837 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·	,
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	erformance of my duties, and	I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 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	Cory N. Beltran	6647 Winder Oaks Blud	D Add
	v	Orlando, FZ 32819	Remove
			Ki Change
<u>mgh</u>	Matthew F. Alai	3929 Azalea-Sands Lan	<u>∟</u> □ Add
		Championegate, FC 33891	<u>o</u> □ Remove
			Change
MGR_	Daniel M. Fard	48010 Brightmow Circle	D Add
		Orlando, FZ 32837	Remove
			A Change
			O Add
			🗆 Remove
			Change
			🗆 Add
			Remove
			Change
			🗀 Add
			Remove
			□ Change

If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
_	
-	
-	
-	
-	
-	
Note:	ive date, if other than the date of filing:
	cord 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	Ca N. Bella-
	Signature of a member or authorized representative of a member Cory W. Beltra 01/29/19 Typed or printed name of signee

D.

Page 3 of 3

Filing Fee: \$25.00