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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC

Account Number : I20150000089

Phone : (305)444-8800

Fax Number : (305)444-4010

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

Email Address:\_\_\_cayon@hcoadvisors.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SNOW WOOD TICKETS LLC

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R. SALY JUL - 6 2021 Help

From: Glovanna Brandonisio Fax: 13058098006

Fax: (850) 617-6383

Page: 3 of 5

07/01/2021 5:32 PM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED
2021 JUL -2 PM 4: 25
3EUNE MAN TALLAHASSET I LORIO.

Snow Wood Tickets LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	City	Zip Code
	, Flor	ida
New Registered Office Address:	Enter Florida street address	
Name of New Registered Agent:		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regis
Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new principal offices address, if applicable:		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited liab		
his amendment is submitted to amend the following:		
lorida document number		
The Articles of Organization for this Limited Liability Company Clorida document number 1.18000110128	were filed on war and a second	and assigned
	~ 05/07/2018	

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

To:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Roberto Peressutti Pinto Ferreria	2330 PONCE DE LEON BLVD	≣∧dd
		CORAL GABLES, FL 33134	🗆 Remove
			☐ Change
			□Add
			Fe Grange
			S C C
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Note: If the date inserted in the	the date of filing:  te must be specific and cannot be prior to danis block does not meet the applicable the Department of State's records.	te of filing or more than 90 days	optional) after filing.) Pursuant to 605.0207 (3) this date will not be listed as the
he record specifies a delayed ef ord is filed.	fective date, but not an effective time,	at 12:01 a.m. on the earlier c	f: (b) The 90th day after the
June 23	Signature of a member or bothorized		
	Malrie	la flehieri	

Typed or printed name of signee