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JAN 0 9 2019 S. YOUNG

COVER LETTER

Division of Co				
	ENTS & CONCIERGE SERVI	CES LLC		
SUBJECT:	Name of I in	nited Liability Company		
The enclosed Articles o	f Amendment and feets) are sul	omitted for filing.		
	ondence concerning this matter			
	ASHA LEWIS			
		Name of Person		
	AMA EVENTS & CONC	HERGE SERVICES LLC		
		Firm Company		
	1192 N.W 40TH AVE .#	517		- -
		Address		A
	LAUDERHILL, FL 3331	.3		FIL BEC 2
	SE			
	amaeventsconciergeservice	-		
For further information	F-mail address:	to be used for future annual report nots all:	lication)	6: 18
ASHA LEWIS		870 413-8165		
Name	of Person	at ()	e Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25,00 Filing Fee	S30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Regis Divisi	ANG ADDRESS: tration Section on of Corporations	STREET/COURI Registration Section Division of Corpor Clines Building	าท	

Tallahassee, FL 32334

Clifton Building 2661 Executive Center Circle

Tallahassee, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMA EVENTS & CONCEIRGE	SERVICES LLC		
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on our re Tiability Company)	cords.)
The Articles of Organization for this Limited I Florida document number $\frac{1.18000256132}{1.000256132}$.iability Company	c were filed on 10 31 2018	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited lial	oility company here:	
AMA EVENTS & CONCIERGE SERVICES LL	(·		
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation?	1.1 C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N A	<u> </u>
Principal office address MUST BE A STRE	ET ADDRESS _I		TEC 2
Enter new mailing address, if applicable:		N A	6 M
Mailing address MAY BE A POST OFFICE BOX)			6: 18
B. If amending the registered agent and registered agent and/or the new registered of			ords, enter the name of the
Name of New Registered Agent:	N A		
New Registered Office Address:	N A	Enter Florala street a	then
		тансе с почина мусеч на	KH C 55
		·	, Florida
		Cuy	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

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** □ Add _□ Remove _□ Change ☐ Remove _□ Add □ Remove _ Change _□ Remove _□ Change □ Add ☐ Remove

□ Change

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Filing Fee: \$25.00