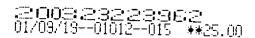
# L18000266028

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# COVER LETTER

TO:	Registration Section Division of Corpor			4	•
SUBJI	ест: <u>Ч</u> 2	O BROWW Name of Limi	2D Festi ted Liability Company	VAL	
The en	iclosed Articles of Am	endment and fee(s) are subr	nitted for filing.		
Please	return all corresponde	nce concerning this matter t	to the following:		
		Rau	Medine Name of Person	- Jr.	
		420 Brow	uard Fee	stival	<u>.                                      </u>
		1407 N			
		Hollywood	Address F	33021	
	-	Hollywood 420 brown E-mail address: (1	City/State and Zip Code	report notification)	<u> </u>
For fur	ther information conc	erning this matter, please ca			
Ī	Raul Med Name of Pe	ne dr-	at ( <u>954</u> )	638-26 Daytime Telepho	one Number
Enclos	ed is a check for the fo	ollowing amount:			
□ <b>\$</b> 2	5.00 Filing Fee 1	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee of Certified Copy (additional copy is end		\$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



January 17, 2019

RAUL MEDINA, JR. 420 BROWARD FESTIVAL LLC 1407 N 58 AVE HOLLYWOOD, FL 33021

SUBJECT: 420 BROWARD FESTIVAL LLC.

Ref. Number: L18000266028

We have received your document for 420 BROWARD FESTIVAL LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 019A00001379

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20/9/1/AM 9:46

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida \_

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> Name Type of Action Rapul MS Medina 1407 NS8 St Hollywood FL 33021 ☐ Remove ☐ Change UP Napeebah Medina 1407 N 58 St Hollywood ☐ Remove ☐ Change \_ 🗆 Add □ Remove \_\_ Change □ Add □ Remove \_□ Change \_□ Remove \_□ Change □ Add ☐ Remove

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D. If amendin					ange(s) her -estic				ts, if nece	rssary.)		
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Page 3 of 3

Filing Fee: \$25.00