L190000 46111

(Reque	stor's Name)	
(Addres	s)	
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(Docum	ent Number)	
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ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration S Division of Co			
Frenzy Ho	ouse Entertainment & Media	LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kamilah Douglas		
	96 Entertainment LLC	Name of Person	
	5281 SW 8th CT	Firn/Company	
	Plantation, FL 33317	Address	
	96entertainment1@gmail.co	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	eation)
For further information of	concerning this matter, please co	all:	
Kamilah Douglas		954 618-7680	
Name o	of Person	at ()	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Frenzy House Entertainment & Media LLC

(Name of the Limited Liability Company as it now appears on Alle 1827 A 1189 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Cor	npany were filed on February	ICRETARY OF STATE. 15 ARTS EL FLOMO Assigned
Florida document number L19000046111	npany were med on	this things.
Florida document number	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
96 Entertainment LLC		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>	
Parkers and the state of the st		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:		ecords, <u>enter the name of the new</u>
New Registered Office Address:		
New Registered Office Address.		Loddras
-	Enter Florida stree	(taaress
		, Florida
New Registered Agent's Signature, if changing Registered A	Cuy	

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 = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
		-	
			□ Remove
			Change
4			Add
			☐ Remove
			Remove
			Change
			☐ Remove
			□ Change
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			☐ Remove

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ective date, if other than reffective date is listed, the date te: If the date inserted in the nument's effective date on t	iis block does not	meet the applica	o date of filing or m ble statutory filing	(option than 90 days after prequirements, this	onal) filing.) Pursuant to 605.020 date will not be listed a
record specifies a dela he 90th day after the	ayed effective record is filed	date, but not	an effective t	ime, at 12:01 a	.m. on the earlier o
February 25,		2019	·		
Kamilo	J. Pon		rized representative		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00