119000082792

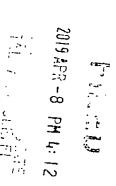




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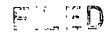
R. WHITE APR 13 200



COVER LETTER

TO:	Registra Division				•
SUBJE	S. S	HERPES	S ENTERTAINMENT, LLC		
SUBJE	.C1;		Name of Limi	ted Liability Company	
			mendment and fee(s) are sub-		
Please t	return all c	orrespon	dence concerning this matter	to the following:	
			10:	SEPH KENNETT, ESQ.	
				Name of Person	
			BR	ICK BUSINESS LAW, PA	
			Lors	Firm/Company S ASHLEY DRIVE, SUITE 6	20
				Address	
			т.	AMPA, FL 33602	
				City/State and Zip Code	
			DRYN	DES@AOL.COM	
			E-mail address: ()	o be used for future annual rep	ort notification)
For furt	ther inform	ation co	ncerning this matter, please co	ill:	
	MARIET	TE TOR	IBIO	813 at ()	816-1816
		Name of	Person	Area Code	Daytime Telephone Number
Enclose	ed is a chec	k for the	following amount:		
□ * \$25	5.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy tadditional copy is enclos	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	Registration Division of Clifton Bui	Corporations lding tive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SHERPES ENTERTAINMENT I	LLC	2019 APR -8	PH 4: 12
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our ited Liability Company)	records:)	DEE, FL
The Articles of Organization for this Limited Liability Comp	pany were filed on $3.25.20$	19 —————	and assigned
Florida document number 1.19000082792			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
SPHERES ENTERTAINMENT, ELC			
The new name must be distinguishable and contain the words "Limited I		n "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	N/A	-	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:		ecords, <u>enter th</u>	e name of the new
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag			
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	olete performance of my dut. Cas provided for in Chapter	ies, and Lam fan 605, F.S. Or, if i	niliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member N/A					
<u>itle</u>	Name	Address	Type of Action		
			Remove		
			Change		
			Add		
			Remove		
			Change		
			☐ Remove		
			Add		
			□ Remove		
			□ Change		
			Add		
			Remove		
			Change		
			Add		
			□ Remove		

	N/A
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lote: If	e date, if other than the date of filing:
	to the transfer of the control of th
	rd specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier o 0th day after the record is filed.
atad	APRIL 2 2019
u	
	Signature of a member or authorized representative of a member
	JOSEPH KENNETT, ESQ.

Page 3 of 3

Filing Fee: \$25.00