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SECRETARY OF STATE
TALL AND SSEE JE



COVER LETTER

TO:

Registration Section

Division of Co	rporations			
CUB tree	Latatand.	//C.		
SUBJECT:	Latatand 1 Name of Lim	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:		
r	······································	<u></u>		
	Anastasia	Pan Filova Name of Person		
			:0	~>
	Lalala	PND ILC Firm/Company	a di di	021
		Firm/Company		
	14660 NW	17th drive	ARY	2021 JUL 15 PM 3: 15
		Address	700 H	PA (
	Miami, H	FL 33167 City/State and Zip Code	STAT	<u></u>
				<u>ဂ</u>
	LaLaLande E-mail address: (vent 21 @ gmail. Co to be used for future annual report not	COM ification)	
For further information of	concerning this matter, please c			
Anastasia	Panfilova	at ()954 Area Code Daytin	- 937 -2651	
Name o	of Person	Area Code Daytin	ne 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)	S60.00 Filing Factorial Certificate of Certified Copy (additional copy in the	Status & y
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Se	ection	
Division of C		Division of Co		
P.O. Box 632		The Centre of T	Γallahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lot Lot LAND LL	LC .
(Name of the Limited Liability Comp. (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Company	ny were filed on June, 30 2021 and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
LA LA LAND EVENT LLC	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or substreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	HE ST ST
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	71 01
3. If amending the registered agent and/or registered office	address on our records, enter the name of the new regist
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	City 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 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
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