

To:

Page: 2 of 5

2023-01-18 15:35:13 GMT

13053284772

From: Yanet Avila

1/18/23, 12:38 PM

Division of Corporations

L22000356056

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000021431 3)))



H230000214313ABCQ

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000145  
Phone : (305)444-4994  
Fax Number : (305)328-4774

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PSP ENTERTAINMENT & PROMOTIONS L.L.C

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JAN 19 2023

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PSP Entertainment & Promotions LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/12/2022 and assigned  
Florida document number L22000356056

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

PSP Entertainment & Promotions LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1825 NW Corporate Blvd Suite 110

(Principal office address MUST BE A STREET ADDRESS)

Boca Raton FL 33431

Enter new mailing address, if applicable:

5111 NE 6th Ave

(Mailing address MAY BE A POST OFFICE BOX)

Pompano Beach FL 33064

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

CHANGE OF ADDRESS

New Registered Office Address:

1825 NW Corporate Blvd Suite 110

*Enter Florida street address*

Boca Raton

Florida 33431

*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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Marvin Destin	5111 NE 6th Ave, Pompano Beach FL 33064	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 JAN 18 PM 1:59

Page 2 of 3

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

I can now be reached via telephone at (561)- 541-4974

Add email Mdesun90@yahoo.com for any business related purposes.

2023 JAN 18 PM 1:59

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

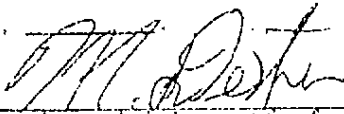
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Marvin Destin

\_\_\_\_\_  
Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00