# L22000454839

(Re	questor's Name)	
(Ada	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	 e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do-	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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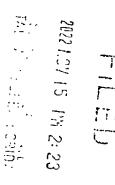
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## **COVER LETTER**

Division of Co	orporations	
LILAVOI	IS ENTERTAINMENT LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.	
Please return all correspo	condence concerning this matter to the following:	
	Amanda J. Beren	
	Name of Person	
	Firm/Company	
	31416 Agoura Rd., Stc. 118	
	Address	
	Westlake Village, CA 91361	
	City/State and Zip Code	
	filings@corpnet.com	
	E-mail address: (to be used for future annual report notification)	
For further information c	concerning this matter, please call:	
Amanda J. Beren	888 449-2638 at ()	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for the	the following amount:	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

**Registration Section** 

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**

#### LILAVOIS ENTERTAINMENT LLC

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

(A Florida Limited L	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000454839	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6721 SW 7th Place	
(Principal office address MUST BE A STREET ADDRESS)	North Lauderdale, FL 33068	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	6721 SW 7th Place North Lauderdale, FL 33068	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:	fice address on our records, <u>ent</u>	150 PM
New Registered Office Address:		Sirving P
	Enter Florida street address	2: 2
	, Florida	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>	Address	Type of Action
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			Change
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			Remove
			Change

). Hanen	ding any other information,	enter change(s) nere:	(Allach addilio)	ial sheets, if necess	ary.)
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(If an effec	e date, if other than the date tive date is listed, the date must be specified date inserted in this block dout's effective date on the Department	ecific and cannot be prior to ses not meet the applicab	date of filing or mor	re than 90 days after fili	ng.) Pursuant to 605,0207 (3):
f the reco b) The 9	rd specifies a delayed effe 0th day after the record is	ctive date, but not ; filed.	an effective tir	ne, at 12:01 a.n	n. on the earlier of:
Dated _	November 10	. 2022	_·		
	Signat	ure of a member or authori	Legal representative of	f a member	
		are or a member of authori	izea representative o	i a memuei	
	VALENSO LILVOIS		name of signee		

Page 3 of 3

Filing Fee: \$25.00