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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	EZ Vuitton	Entertainment	LLC_
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	•	Vave UK Name of Person	
	REEZ V	Firm/Company	tainment LLC
		E 45th COV	
		derdale, FL City/State and Zip Code	
	E-mail address: (KB3@6MAL. to be used for future annual report noti	COM
For further information of	concerning this matter, please c	all:	
Ryan	Lave CK	at (9SA) 412 - Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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 Addre		Street Address:	etion
Registration Division of G		Registration Se Division of Co	
P.O. Box 633		The Centre of T	Fallahassee
Tallahassee.		2415 N. Monre	e Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REEZ Vuitton 6	entertainment LLC
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2Z000505508</u>	1120120
This amendment is submitted to amend the following:	" n : :
A. If amending name, enter the new name of the limited liabi	LC ==
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	350 NE 95th court Fort Lauderdale, Fi 33334
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	350 NE ASTA COUIT Fort Landerdale, Fi 33334
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: New Registered Office Address: Fort	Ryan Lave CK 350 NE 45th COURT Emer Florida street address Lavdurdale Florida 33334 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
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			Change
			□Remove
			□ Change
			□Add
			□Remove
		<u> </u>	□Change

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
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 cord is filed.
Dated April 4th 2024
Dated April 4th 2024. Programmed a member of a member of a member.
Signature of a member or authorized representative of a member And Lave CC Typed or printed name of signee