107000089859

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EXAMINER

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SECKLINNI OF STATE
TALLAHASSEE FLORIDA

8 OCT - I AM 8: 3:

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: SANTO	S BROTHERS LLC		
		ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	•
Please return all correspon	ndence concerning this matter	to the following:	
	RICARDO ORTEGA		
		(Name of Person)	
	FAST AGENCY SERVIC	ES	
		(Firm/Company)	
	7870 W FLAGLER ST		
		(Address)	·
	MIAMI, FL 33144		
		(City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
RICARDO L ORTEGA		at (954 ₎ 483-0216	
(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for th	e following amount:		
□ \$25.00 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)
MATT I	INC ADDRESS.	STOPET/COUDIED	A A A A A A A A A A A A A A A A A A A
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tollahassan El 20214		2661 Evenitive Conte	u Cinala

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANTOS BROTHERS LLC				
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
(AT I to I da Dillined Liability Company)				
The Articles of Organization for this Limited Liability Company were filed on AUGUST 31, 2007 and assigned				
Florida document number L07000089859				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company here:				
SAINTS AUDIO TECH INSTITUTE L.L.C.				
The new name must be distinguishable and end with the words "Limited Liability 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)				
• • • • • • • • • • • • • • • • • • •				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
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:				
New Registered Office Address:				
(Enter Florida street address)				
, Florida				
(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 608, F.S. Or, if this document is 13				
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)				

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			f Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
<u>-</u>			
Dated	SEPTEMBER 29, 2	008 Les	OR OCT -1 /
	HIMMLEY	er or authorized representative of a member (ENDE) ed or printed name of signee	MM 8: 36
		Page 2 of 2	

Filing Fee: \$25.00