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J. SAULSBERRY EXAMINER SEP 12 2013

## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: TIME WARP RECORDS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Katelyn A Booth

TIME WARP RECORDS LLC

7408 Oak Run LN

Sarasota, FL 34243
City State and Zip Code

Ktatelynabouth again (0M)
E-mail address: (to be used to) future annual report notification)

For further information concerning this matter, please call:

Christian Downing at (94) 592-7376

Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

□S30.00 Filing Fee & Certificate of Status 855.00 Filing Fee & Certified Copy (additional copy is enclosed) \$560.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed

MAILING ADDRESS:

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

(Name of the Limited Liability Compa	pany as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number [13000] [2384]	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
VATICAN CITY VINYL Records Limit the new name must be distinguishable and end with the words "Limit"L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	404 South Washington Bivd. Sarasota, FL ===================================
Enter new mailing address, if applicable:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	#H 9: 32
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	office address on our records, enter the name of the new ere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
CONTRACTOR OF THE PROPERTY OF	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

TIME Illam Paraved 5 116

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 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 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:

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
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If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary)
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ted l	9171.2013
	Authur a Booth Signature of a member or authorized representative of a member
	Katelyn A Booth
	Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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