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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Artillery Music, 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:

Josias De La Cruz

Name of Person

Artillery Music, LLC

Firm/Company

9760 NW 74th Ter

Address

Miami, FL 33178

City/State and Zip Cpde

elarmasecreta@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josias G. De La Cruz Reynoso

.,787

932-8921

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- S55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- ☐ \$60.00 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
Clipton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Artillery Music, LLC</u>				<del></del>	
( <u>Name of the Limited</u> (A	Liability Compa: Florida Limited L	ny as it ndv. iability Co	v appears on our records.) mpany)		
The Articles of Organization for this Limited Liab	oility Company	were file	on 03/10/2016	and assigned	
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	h <u>e limited liabi</u>	ility com	pany here:		
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Compa	ny," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:	<del></del>	0 NW 74TH TER		
Principal office address MUST BE A STREET	ADDRESS)	MIA	MI FL, 33178	<b>8</b> (E)	
				ARE ARE	
				AR ASS 25	(آت —
Enter new mailing address, if applicable:				<b>P</b>	C
Mailing address MAY BE A POST OFFICE Bo	0X)			FLO	
				S A A	
B. If amending the registered agent and/or registered agent and/or the new registered officers.			ress on our records, <u>ente</u>	r the name of the ne	<u>. W</u>
Name of New Registered Agent:	Gonzalo	M. R	angel		
New Registered Office Address:	<u>9760 NV</u>		H TER		
	MIAMI	City	, Florida	33178 Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:	<i>-</i>			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this co	and complete ered agent as p gistered office	perform provided	ance of my duties, and I an for in Chapter 605, F.S. O	n familiar with and r, if this document is limited liability	e

If Changing Registered Agent, Signature of New Registered Agent

if amending or removed	Authorized Person(s) authorized to r from our records:	nanage, <u>enter the title, name, and address</u>	of each person being added
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gonzalo M. Rangel	9760 NW 74TH TER	• Add
		MIAMI FL, 33178	□ Remove
			Change
			□ Add
			Remove
			Change
			Remove
			Change
			Remove
			□ Change
			Remove
			Change
			□ Remove
			☐ Change

). If amending any othe	r information enter ch	ange(s) here: (Atta	ch additional sheets if	necessarv)	
. It amending any ome	i inioi mation, enter en	ange(s) nere. (Ana	en paumonai sneets, y	iccessury.y	
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	<u>.</u>			25	ARY SSE
					프유
				2. <u>ن</u>	STAT LORII
<del> </del>					₽ E
		<del></del>			
E. Effective date, if othe	r than the date of filing	3:	(	optional)	
(If an effective date is listed Note: If the date insert	, the date must be specific and ed in this block does not n	l cannot be prior to date on neet the applicable stat	f filing or more than 90 days tutory filing requirements	after filing.) Pursuant to 605.  i, this date will not be liste	.0207 (3)(b ed as the
	ate on the Department of S		Ì		
If the record specifies	a delayed effective o	late but not an el	ffective time at 12:	01 a.m. on the earlie	er of:
(b) The 90th day after	er the record is filed.	idea, but hat an e.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>01</b> 2 5,, <b>0</b> 0	
Dated 01/22/	701B	1:00PM _	\		
Dated UI/ZZ/	2010	1.901111	ALA		
		The state of the s	49(1)		
	Signature of a	member or authorized re	presentative (Comember		
Josia	s G. De La	<u>Cřuz</u>			
		Typed or printed name	of signer		

Page 3 of 3

Filing Fee: \$25.00