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COVER LETTER

TO: Registration Section **Division of Corporations** TUNE 2018 LLC Florida Limited Liability Company SUBJECT: _ 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: Bruce Hornstein Name of Person Bruce Hornstein, P.A. Firm/Company 6961 Indian Creek Drive Address Miami Beach, Florida 33141 City/State and Zip Code bhornstein@hornsteinpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bruce Hornstein Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee.

Certificate of Status & Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TUNE 2018 LLC Florida Limited Liability	•	
(Name of the Limited Liab (A Flor	pility Company as it now appears on our records.) ida Limited Liability Company)	<u></u>
The Articles of Organization for this Limited Liability	Company were filed on 06/29/2018	and assigned
Florida document number L18000159759		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "1.	imited 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 ADI	DRESS)	18
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Enter new mailing address, if applicable:		LEL CRES
(Mailing address MAY BE A POST OFFICE BOX)		3 ON
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B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	ja
	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 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
MGR	Fortuna Cohen	2041 SW 7th Street	_
		Miami, Florida 33135	
		Mianii, Fiorida 55155	☐ Remove
			Change
MGR	Lea Blum	2041 SW 7th Street	
		Miami, Florida 33135	∃ Add
		- Straint, Florida 53155	□ Remove
			Change
MGR	Aviva Cohen	2041 SW 7th Street	
		Miami, Florida 33135	
			☐ Remove
			Change
MGR	Nissin Cohen	2041 SW 7th Street	\ Add
		Miami, Florida 33135	
			□ Remove
			Change
MGR	Dalia Cohen	2041 SW 7th Street	= Add
		Miami, Florida 33135	
		-	□ Remove
			Change
MGR	Dalia Cohen	2041 SW 7th Street	
		Miami, Florida 33135	·
			Remove

If amending any other informati	on, enter change(s) here: //Attach	additional sheets, if necessary.)	
			
			
			
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If an effective date is listed, the date must I	ate of filing:	ing or more than 90 days after filing.) Pursi	iant to 605,0207 ot be listed as i
ne record specifies a delayed of The 90th day after the recor	effective date, but not an effec d is filed.	tive time, at 12:01 a.m. on th	ne earlier of:
Dated	. 2018		
- ans	ignature of a member or authorized represe	entative of a member	
Aviva Cohen			
	Typed or printed name of si		

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Filing Fee: \$25.00