

18000184250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

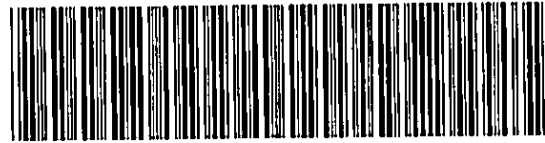
(Business Entity Name)

(Document Number)

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2018 NOV 30 AM 9: 29

SECRETARY OF STATE
TALLAHASSEE, FL

LTS
12-6-18

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION OF**

FILED
2018 NOV 30 AM 9: 29

ALDA MUSIC SCHOOL LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company) COUNTY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 08/01/2018 and assigned Florida document number L18000184250.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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)

8698 NW 44 STREET

SUNRISE, FL. 33351

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:

RUIZ, ALVARO

New Registered Office Address:

8698 NW 44 STREET

Enter Florida street address

SUNRISE

Florida 33351

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	RUIZ, YULY	8698 NW 44 STREET	<input type="checkbox"/> Add
		SUNRISE, FL. 33351	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	RUIZ, ALVARO	8698 NW 44 STREET	<input type="checkbox"/> Add
		SUNRISE, FL. 33351	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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