

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000159653

Entity Name: FIND YOUR MUSE ENTERTAINMENT LLC**Current Principal Place of Business:**4000 PONCE DE LEON BLVD
SUITE 470
CORAL GABLES, FL 33146**Current Mailing Address:**4000 PONCE DE LEON BLVD
SUITE 470
CORAL GABLES, FL 33146 US**FEI Number:** 86-3324905**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OE CORAL GABLES, INC.
4000 PONCE DE LEON BLVD
SUITE 470
CORAL GABLES, FL 33146 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	P
Name	MACHO, JOHN
Address	4000 PONCE DE LEON BLVD SUITE 470
City-State-Zip:	CORAL GABLES FL 33146

Title	S
Name	ARIAS, PATRICIA
Address	4000 PONCE DE LEON BLVD SUITE 470
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	MARTINEZ, JOSE LUIS
Address	4000 PONCE DE LEON BLVD SUITE 470
City-State-Zip:	CORAL GABLES FL 33146

Title	DIRECTOR
Name	REYES, MANUEL
Address	4000 PONCE DE LEON BLVD SUITE 470
City-State-Zip:	CORAL GABLES FL 33146

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA ARIAS**SECRETARY****11/29/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date