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SCRATCH DJ ACADEMY-MIAMI, LLC

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COVER LETTER

TO: Registration Division of C	i Section Corporations						
SUBJECT:	Scratch DJ /	Academy-Miami LLC					
		ited Liability Company	The state of the s				
			•				
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	:				
Please return all corre	spondence concerning this matte	r to the following:					
		Sandra Blake	6				
•	*	Name of Person	A STATE OF THE PARTY OF THE PAR				
	G	Greenberg Traurig, LLP	10 MAR -8				
		Firm/Company	Congress				
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	And the second s	Atlanta, GA 30327 City/State and Zip Code	· Annique and the control of the con				
		sitard@gtlaw.com					
	E-mail address:	to be used for future annual report notif	ication)				
For further informatio	n concerning this matter, please	call:					
	Sandra Blake	at (678)	553-2185				
Nam	e of Person	Arcu Code & Daytim	e Telephone Number				
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linetosed is a check fo	r the following amount:	•	•				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				
Regi Divi P.O.	HAING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Scratch DJ Academy-Miami LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited	Liability Con	ipany were filed or	n <u>September</u>	6, 2005 and assigned
Florida document numberL050000	87914			•
This amendment is submitted to amend the fe	illowing:			
A. If amending name, enter the new name	of the limited	l fiability compan	<u>y here</u> :	
	Scratch Mu	usic Group, LL0	O,	
The new name must be distinguishable and end v "L.L.C."	with the words	"Limited Liability (Company," the desig	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STRE	EET ADDRES	<u>:S)</u>		

Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)			n	

B. If amending the registered agent and registered agent and/or the new registered	d/or registere office address	d office address shere:	on our records,	enter the name of the new
Name of New Registered Agent:	N/A		·	Andrew Control of the
New Registered Office Address:	N/A			
		Enter Florida street address		
	-		, Fic	orida
		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 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:

MGR = Manager

MGRM = Managing Member Type of Action <u>Address</u> Title. Name N/A ☐ Add Remove Add Remove ☐ Add Remove ∏ Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A March 8 2010 Dated Signature of a member or authorized representative of a member Rob Principe, Managing Member of Scratch Media Productions, LLC, Member

Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00