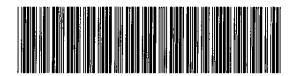
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

Division of Corpo			
SUBJECT: Dion ac	Name of Lim	un town Music Studio ited Liability Company)	s LLC
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	David Die	(Name of Person)	
		(Name of Feison)	
	Dian Downtown	(Firm/Company)	,,
•	312 S	t. Johns Avc. (Address)	
		(City/State and Zip Code)	
For further information cor	cerning this matter, please ca	all:	
David Dion		at (386) 325-25	ol
(Name of	Person)	at (386) 325-24 (Area Code & Daytime 7	Telephone Number)
Enclosed is a check for 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

08 APR 16 AM 10: 33

SECRETARY OF STATE TALLAHASSEE FLORIDA

Dien and Collins Downtown Music Studios 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 Company were filed on Sep 4, 2007 and assigned Florida document number Lo6000111191.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Dian Dewatoria Music Studio LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
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:
New Registered Office Address:
(Enter Florida street address)
, Florida
(City), Florida (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** Title Name **Address** Timoth, L. Collins Remove ☐ Add Remove □Add Remove Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member David D:W Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00