

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000019774

Entity Name: EM.D MUSIC LLC

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

570 UNIVERSITY DR
CORAL GABLES, FL 33134

New Principal Place of Business:

50 SW 18 TERRACE
MIAMI, FL 33129

Current Mailing Address:

P O BOX 143432
CORAL GABLES, FL 33114

New Mailing Address:

50 SW 18 TERRACE
MIAMI, FL 33129

FEI Number: 20-8563623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GIMBLETT, EMILY D
570 UNIVERSITY DR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GIMBLETT, EMILY D
50 SW 18 TERRACE
MIAMI, FL 33129 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: EMILY GIMBLETT

06/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GIMBLETT, EMILY D
Address: 570 UNIVERSITY DR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: GARCIA, MILAGROS
Address: 570 UNIVERSITY DR
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GIMBLETT, EMILY D
Address: 50 SW 18 TERRACE
City-St-Zip: MIAMI, FL 33129

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: EMILY GIMBLETT

MRG

06/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date