

LD7000039308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

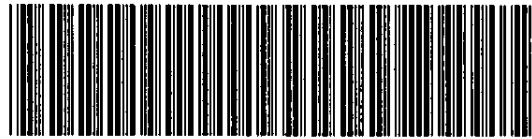
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

JUL 26 2013
L. SELLERS

Office Use Only



000249997400

07/23/13--01014--003 **25.00

FILED
13 JUL 23 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE FORAKIS LAW FIRM, PLC

A PROFESSIONAL LIABILITY COMPANY
346 EAST PALM LANE
PHOENIX, ARIZONA 85004
TELEPHONE (602) 254-2000
TELEFAX (602) 254-0052
www.forakislaw.com

CLIENT TRANSMITTAL

TO: Division of Corporations
FROM: Carly Dugger, Processor
RE: Amendment to Limited Liability Company
DATE: July 19, 2013

ENCLOSURE(S):

1. Articles of Amendment
2. \$25.00 check

Please find the enclosed above mentioned Articles and Statement, Please file the Articles of Organization for LLC and Partnership Registration Statement for the two entities, one original and one copy has been provided. One check has been included to cover the costs for filing. Once approved, please return the approved copies to our office in the provided envelope.

Contact our office should you have any questions about this transmittal.

Thank you

Lowery Musical Creations, LLC

Page 1 of 3

FILED
13 JUL 23 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

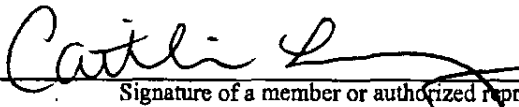
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GLL TRUST 1, DATED 6/25/91	5635 CLIFTON LANE	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32211	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 7/1/13



Signature of a member or authorized representative of a member

Caitlin Lowery, Trustee of CAITLIN LOWERY TRUST, DATED 1/1/07 (MGRM)

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00