L08000051125

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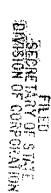
EXAMINER



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TO:

Registration Section

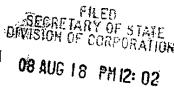
P.O. Box 6327 Tallahassee, FL 32314

Division of Co	rporations			
SUBJECT: AYALA	SUNSHINE MUSIC	LLC	D	
Sobject, vivial		ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Marta	ATA AYALA (Drame of Person)		
	2	(Firm/Company)		
	15095	SW 20TH LN (Address)		
	MIAI	MI, FL 33185 (City/State and Zip Code)		
For further information of	concerning this matter, please ca			
		at (786) 376-1635		
(Name of Person)		(Area Code & Daytime Telephone Number)		
Enclosed is a check for t	he 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)	
Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



		IINE MUSIC LLC	
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our reculability Company)	ords.)
The Articles of Organization for this Limited I	Liability Company	were filed on 05/22/2008	and assigned
Florida document number L08000051125	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
N/A			
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company," the desig	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		MARTA AYALA	
(Principal office address MUST BE A STREET ADDRESS)		15095 SW 20TH LN	
•		MIAMI, FL 33185	
Enter new mailing address, if applicable:	·		
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
	(Enter Florida street address)		
	N/A		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 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 Title **Address** Type of Action Name MGRM MARTA AYALA 15095 SW 20TH LN Add 🔽 MIAMI, FL 33185 Remove MGR LAURA AYALA 15095 SW 20TH LN **₽** Add MIAMI, FL 33185 ■ Remove 🗂 Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AUGUST 13 Dated Signature of a member or authorized representative of a member MARTA AYALA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00