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SECRETARY OF STATE
AND ASSEE FI OBIO

J. BRYAN

MAR 23 2009

EXAMINER

COVER LETTER

TO:	Registration So Division of Co				
SUBJ	ECT:	Evenso	ng Music, LLC		
5000			ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			Rebecca L. Renfroe		
			Name of Person		TILEU 10 MAR 22 PM 2: 49 SECRETARY OF STATE SECRETARY OF FLORID
		-	Firm/Company		AR 22 PR
	112 Hiawatha Trail				麗 呈 四
	Address				2: 4: STAT FLOR
			Lakeland, FL 33803		
			City/State and Zip Code		
		E-mail address: (to be used for future annual repo	rt notification)	
For fu	rther information of	concerning this matter, please of	call:		
		ecca L. Renfroe	at (_863_)	686-8216	
	Name o	of Person	Area Code & I	Daytime Telephone N	lumber
Enclos	sed is a check for t	the following amount:			
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status		\$55.00 Filing Fee & Certified Copy (additional copy is en	Ce closed) Ce	00 Filing Fee, rtificate of Status & rtified Copy Iditional copy is enclosed)	
	MAIL	LING ADDRESS:	STREET/C	OURIER ADDRE	CSS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Evensong Music, LLC			
(<u>Name of the Limit</u> e	ed Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited	Liability Company were filed on	06/15/2009	and assigned	
Florida document numberL090000	57553			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end v "L.L.C."	with the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if appl	icable:	jū-	<u> </u>	
(Principal office address MUST BE A STRE	EET ADDRESS)	ू इर्	G I T	
			22	
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	P P P	
(Mailing address MAY BE A POST OFFIC	E BOX)	ORAT 59		
			-	
B. If amending the registered agent and registered agent and/or the new registered		our records, <u>enter t</u>	he name of the nev	
Name of New Registered Agent:	Jon F. Larson		<u></u>	
New Registered Office Address:	1401 South Florida Avenu	e		
- · · · · · · · · · · · · · · · · · · ·	E	nter Florida street addi	ress	
	Lakeland	, Florida	33803	
	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

Page 1 of 2

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 = N	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
D. If am	ending any other information, enter ch	hange(s) here: (Attach additional sheets, if necessar)	22 24
Dated	Signature of a me	ember or authorized representative of a member	·
		Rebecca L. Renfroe	

Page 2 of 2

Filing Fee: \$25.00