## L10000018495

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**EXAMINER** 

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	FARKANO MUSIC	ENTERTAINMENT, LLC	· 
-	Name of Lim	ited Liability Company	<del></del>
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.	
Please return all corr	espondence concerning this matte	r to the following:	
		EDINSON B CANO  Name of Person	
	Farkano		UMEST, LLC
:r	3730 I	INVERRARY DR APT H-2X Address	2010 MAR 29 PM II SECRE LAIRY OF S TALLAH ASSEE, FI
			29 Ass
	L/	AUDERHILL, FL 33319	
	,	City/State and Zip Code	2:
	E-mail address:	info@farkano.com (to be used for future annual report notificat	ion) S S
For further informati	on concerning this matter, please		
<b>-</b>	DINICON P. CANO	054.) 64	4-2280
EDINSON B CANO Name of Person		at ( 954 ) 64  Area Code & Daytime To	
Enclosed is a check t	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)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Re Di P.G	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	<del></del>	
The Articles of Organization for this Limited Liability (	Company were filed on	2-17-2010	and assigne	d
Florida document numberL100000184995				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> : .		
The new name must be distinguishable and end with the wo	ords "Limited Liability Compa	any," the designation "	LLC" or the abbre	viation
Enter new principal offices address, if applicable:			2010 SE	
(Principal office address MUST BE A STREET ADD	RESS)			7
•	William Co.		29 ASSET	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		our records, <u>enter</u>	the name of th	e nev
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	F.	nter Florida street ad	drass	<del></del>
	£,	uer r toriaa street aa , Florida	ur ess	
<del></del>	City	, FIONGS	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 **Address Type of Action Title** <u>Name</u> 3730 INVERRARY DR EDINSON B CANO ✓ Add <u>MGR</u> APT H-2X Remove LAUDERHILL, FL 33319 3730 INVERRARY DR MGRM ADRIANA P CANO ✓ Add APT H-2X ☐ Remove LAUDERHILL. FL 33319 Remove  $\Box$  Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 22 2010 Signature of a member or authorized representative of a member-

Page 2 of 2

Filing Fee: \$25.00

EDINSON B CANO
Typed or printed name of signee