110000025755

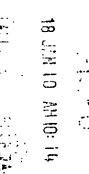
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
4

Office Use Only



300307336683

01/10/18--01015--007 **25.00



O SIMMONS

COVER LETTER

SUBJECT: OLIMPICA STEREO LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
PEdro O. CERON Name of Person OLIMPICA STERED LLC Figur/Company
OLIMPICA STERED LLC Firm/Company
23/6 NW & 30TH COURT
OAKIAND PAYK, FL 33311 City/State and Zip Code OLIMPICA STERED USA @ GHail. COM. J-mail address: (to be used for future annual report notification)
V-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PEdro O. CERou' at (914) 274-5100. Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: Second Filing Fee

MAILING ADDRESS:

TO: Registration Section

Division of Corporations

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	STEREO LLC	
(Name of the Lit	mited Liability Company as it now appears on our records.)	
 	(A Florida Limited Liability Company)	

The Articles of Organization for this Limited Liability Company were filed on 03 - 08 - 2010 and assigned Florida document number <u>L 10000025755</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: OLIMPICA STEREO - RAdio - TV & ENTERTAINMENT LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address __. Florida ___ City 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name 1	Address	Type of Action
	N/B		
			□ Remove
			Change
			□ Add
			☐ Remove
		<u> </u>	☐ Change
			
			Dayson i
			Change
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change

_	H/A.
	8 U.H. D. L.
	<u> </u>
	<i>y</i> :
	e date, if other than the date of filing: $\partial/oi/20/8$ (optional)
Effec	e date, if other than the date of filing:
Note:	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docur	t's effective date on the Department of State's records.
tha ra	rd energiae a delayed offective date, but not an offective time, at 12:01 a.m. on the earlier of
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o Oth day after the record is filed.
Dated	21-01-2018 Signature of a member or authorized representative of a member TENYO (). (ERON).
	(1) (2)

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00