

L100000089180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

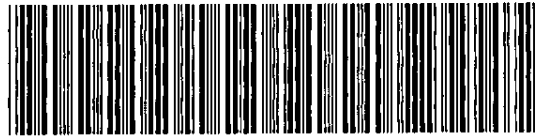
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MAY 15 2012

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12 MAY 14 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Acoustic Soul Music Group, 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:

Scott R. Jablonski

Name of Person

Acoustic Soul Group

Firm/Company

6303 Blue Lagoon Drive Suite 400

Address

Miami, FL 33126

City/State and Zip Code

legal@acousticsoulgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott R. Jablonski

Name of Person

at (305)

781-2366

Area Code & Daytime Telephone Number

Enclosed is a check 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

Acoustic Soul Music Group, LLC

(A Florida Limited Liability Company)

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 = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SJ Acoustic Music Group, L	6303 Blue Lagoon Drive, Suite 400 Miami, FL 33126	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Acoustic Soul Management	6303 Blue Lagoon Drive, Suite 400 Miami, FL 33126	<input checked="" 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.)*

Change "FEI/EIN Number: APPLIED" to "FEI/EIN Number: 27-3312874"

Dated May 7, 2012

Signature of a member or authorized representative of a member

Scott R. Jablonski, President

Typed or printed name of signee