2/1/0000045699

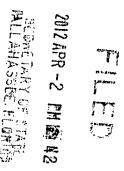
(Requestor's Name)					
(Address)					
(Addreys)					
(Cit//State/Zip/Phone #)					
(Business Entity Name)					
(Document Number) Certified Copies Certificates of Status					
Special Instructions to Filing Officer: A. LUNT					
EXAMINER					
Office Use Only					

14



900227001749

04/02/12--01021--019 **30.00



COVER LETTER

TO:	Registration Section Division of Corporations									
SUBJE	ECT: _	Harris	Music Nan	Compo ne of Limited	any, LL I Liability Compan	<u>С</u> у				
The end	closed A	articles of An	nendment and fee	(s) are submi	itted for filing.			_		
Please	return al	l correspond	ence concerning t	his matter to	the following:					
			フ	oshu a	Harris Name of Person				2012 APR -2	13.7 1 (17.71
				<u> </u>	Firm/Company				PR -	A Law Street, and
			261	o Mar	Address	Drive E	ast i	<u>#104</u>	2 M &	Lancaran Lancaran Lancaran Lancaran
			Fort jost	Laud , hari	City/State and Zip Co City/State and Zip Co Cis @ Sow De used for future ann	FL 33, ode	3/2 m	en lik 10 Sunta Tempera	£ 42	
For furt	ther info	rmation conc	erning this matte							
	Josh	Name of Pe	rson		at (369) Area (242 - 15 Code & Daytime	Telephone	Number	_	
Enclose	ed is a cl	neck for the f	ollowing amount:	:						
\$25.	.00 Filin	ng Fee	\$30.00 Filing F Certificate of	ee & [Status	\$55.00 Filing For Certified Copy (additional copy)	ee & y py is enclosed)	c	.00 Filing F ertificate of ertified Cop dditional co	Status & y	sed)
		MAILING	: ADDRESS:		STR	EET/COURIE	R ANDRI	7 99 .		

MAILING ADDRESS: Registration Section 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

(A Florida Li	mited Liability Company)
The Articles of Organization for this Limited Liability Co.	mpany were filed on April 18, 2011 and assigned
Florida document number <u>L 11000045679</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	ed liability company here: LLC s "Limited Liability Company," the designation "LLC" or the abbreviation
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRE	SSS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/4
B. If amending the registered agent and/or register registered agent and/or the new registered office addre	red office address on our records, enter the name of the new ss here:
Name of New Registered Agent:	<u>/A</u>
New Registered Office Address:	
	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing, Member being added or removed from our records:</u>

MGR = M $MGRM =$	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	·		
		-	
		<u> </u>	Remove
			Add Remove
			→ ∏Add
			Remove 2 APR
			G Add Remove
D. If amer	nding any other information, enter ch	nange(s) here: (Attach additional sheets,	if necessary)
_	N/A		# 2
·			
<u></u>			
Dated		·	,,
	Signature of a mer	mber of authorized representative of a memb	
	Jashua.	mber of authorized representative of a member of authorized representative of a member of signed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00