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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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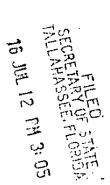
Office Use Only



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JUL 13 2016 S. YOUNG



COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	MOLTO BE	NE STUDIOS LLC		•
SCOSECT:		Name of Limi	ited Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Julia Greenberg-Aguilar		
			Name of Person	
		MyUSAcorporation.com		
			Firm/Company	
		1 Radisson Plaza, Suite 80	0	75 [
			Address	
		New Rochelle		2 PI
		molto@earthlink.net	City/State and Zip Code	16 JUL 12 PH 3: 05
		•	to be used for future annual report notifi	ication) Ci
For further in	nformation co	ncerning this matter, please ca	all:	
Julia Greent	erg - Aguilar		877 330-2677	
	Name of	Person		Telephone Number
Enclosed is a	a check for the	following amount:	/	
⊞ \$25.00 F	iling 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

Registration Section

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

MOLTO BENE STUDIOS LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our recor ted Liability Company)	rds.)
The Articles of Organization for this Limited Liability Comparison of Co	any were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
MOLTO BENE FINISHES LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		= = = = = = = = = = = = = = = = = = = =
(Principal office address MUST BE A STREET ADDRESS	2	6 - CR
		2
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 registered agent and/or the new registered office address		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ress
		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 605, F.S. Or, if this document is being jiled 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

If ameading 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 = A	uthorized Member		•
Titie	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Change
			□ Add
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			☐ Change
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E. Effective date, if other than the date of filing: (Optional) If an effective date is liked, the date must be specific and earnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(a) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated Signature of a member or authorized representative of a member	3. If umending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Ditted Ditted July 6th 2016		_
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Dated July 6th , 2016		sted as the
Dared ,	If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear (b). The 90th day after the record is filed.	lier of:
J. Signature of a member of authorized representative of a member	Dared	
Anthony Morales (Authorized Representative)		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00