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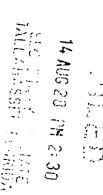
| (Re | questor's Name) | |
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| (Ad | dress) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| Division of Co | | | |
|-----------------------------|--|---|---|
| SUBJECT: | Aconstic Soul K | ecords 11.C- | |
| Subsect. | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Scott R. Jablonski | | |
| | | Name of Person | |
| | SRJpl Law | | |
| | | Firm/Company | |
| | 4100 N. Wickham R | d., Ste. 107A-221 | |
| | | Address | |
| | Melbourne, FL 3293 | 35 | |
| | scott@srjpllaw.com | City/State and Zip Code | ···· |
| | | to be used for future annual report notifi | ication) |
| For further information | concerning this matter, please c | all: | |
| Scott Jablonski | | 305 781-2366 | |
| Name | of Person | at () 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

ARTICLES OF ORGANIZATION OF

| Hoonstic S | on Recon | s, uc | |
|--|---|--|-------------------------------------|
| (Name of the Limite | d Liability Compar A Florida Limited I | ny as it now appears on our records.) lability Company) | |
| The Articles of Organization for this Limited Lia Florida document number | | were filed on | and assigned |
| This amendment is submitted to amend the follow | wing; | | |
| A. If amending name, enter the new name of | J | ility company here: | |
| The new name must be distinguishable and end with the w | ords "Limited Liab | ility Company," the designation "LLC" or the abb | previation "L.L.C." |
| Enter new principal offices address, if applica | ble: | 4100 N. Wickham Rd. | |
| (Principal office address MUST BE A STREET | | Suite 107A-221 | |
| | | Melbourne, FL 32935 | · · · · · |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | (OX) | 4100 N. Wickham Rd. Suite 107A-221 | |
| | | Melbourne, FL 32935 | |
| B. If amending the registered agent and/o registered agent and/or the new registered off | | | ne name of the new |
| Name of New Registered Agent: | SRJpl Law | *** | |
| New Registered Office Address: | 4100 N. Wid | ckham Rd., Ste. 107A-221 | |
| | Melbourne | Enter Florida street address 329, Florida | 35 N |
| New Registered Agent's Signature, if changing Re | egistered Agent: | City | Zip Code |
| I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c | r and complete ered agent as p egistered office | performance of my duties, and I am fai provided for in Chapter 605, F.S. Or, if | miliar with and this document is |

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member <u>Title</u> **Type of Action** <u>Name</u> <u>Address</u> **MGR** 6303 Blue Lagoon Drive Acoustic Soul Manyforunt, LLC Suite 400 Remove Miami, Florida 33126 Aconstic Soul Management, LLC MGR 4100 N. Wickham Rd. ■ Add Suite 107A-221 □ Remove Melbourne, Florida 32935 _□ Add _□ Remove □ Remove ≘ ☐ Remove □ Add ☐ Remove

| ective date must be specific, canno | ot be prior to date of receipt or filed date and canno | (optional) t be more than 90 days after |
|--|--|--|
| te this document is filed by the Flo August 25 | ot be prior to date of receipt or filed date and canno | (optional) t be more than 90 days after |
| ective date must be specific, cannot te this document is filed by the Flo | of the prior to date of receipt or filed date and cannorida Department of State) | (optional) t be more than 90 days after |

Page 3 of 3

Filing Fee: \$25.00