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Florida Department of State **Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383 -20 From: Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, T' g Account Number : 119980000080 Phone : (305) 538-2344 Fax Number : (305)538-0419

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EXAMINER

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			COVER LETTER			
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SUBJECT:		1501 Collins Aven	Le Recording Studio	s, LLC	· <u> </u>	
			ited Liability Company			
The enclosed A	rticles of <i>i</i>	Amendment and fee(s) are su	bmitted for filing.			
Please return al	l correspoi	idence concerning this matte	r to the following:			
	Ŷ	_	- ,			
			Mark Alhadeff		2012 APR	
			Name of Person			
		The	Alhadeff Law Group, P.			, [T]
			Firm/Company			
			767 41st Street			
			Address			
		Ν	liami Beach, FL 33140			
			City/State and Zip Code	-	-	
		m	ark@alhadefflaw.com			
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Mark Alhadeff		at (<u>305</u>)	538-2344			
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	Registra Division P.O. Bot	NG ADDRESS: tion Section of Corporations & 6327 see, FL 32314	Registration S Division of Co Clifton Buildi	orporations ng /e Center Circlo		
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			ICLES OF AMENDMEN TO CLES OF ORGANIZATI OF		H12000089	559 3
		1501 Collin (Name of the Limited (A	s Avenue Recording Stud Liability Company as it now appears Florida Limited Liability Company)	ios, LLC on our records.)	
The Articles of	of Organiza	ation for this Limited Li	ability Company were filed on	02/06/2012	and as	signed
Florida docun	nent numb	er <u>L12000017</u>	427			L
		nitted to amend the follo enter the new name of	owing: <u>the limited liability company here</u>	3	2012 APR -5 Stor Tary (FALLAHASSE	bazar Lauar 11
The new name "L.L.C."	must be dis	stinguishable and end with	h the words "Limited Liability Compan	y," the designation	5. 15	abbrévlation CJ
Enter new pr	rincipal of	fices address, if applics	ıble:			
<u>(Principal off</u>	fice add <u>res</u>	<u>s MUST BE A STREE:</u>	<u> </u>			
	_	ress, if applicable: <u>BE A POST OFFICE 1</u>	<u>30X)</u>			
B. If amend registered age	ling the r ent and/or	egistered agent and/o the new registered off	r registered office address on on I ce address here :	r records, <u>ent</u> s	er the name o	<u>f the new</u>
Nam	e of New H	Registered Agent:	·			
New	Registered	Office Address:				
			Enter	r Florida street i	address	
			, Florida			
			City		Zip Code	
New Registered	d Agent's S	Signature, if changing Re	egistered Agent:			
			agent and agree to act in this cap oper and complete performance of			

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.

If Changing Registered Agent, Signature of New Registered Agent

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Page 1 of 2

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SENATOR LAW CENTER

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

MGR = Mans MGRM = Ma	iger naging Member	H120	00089559 3	
<u>Title</u>	Name	Address		Type of Action
MGR	Andrew Mirmelli	1210 Michigar Miami Beach,	Ave FL 33139	Add Remove
				Add Add S Add S Add S S S S S S S S S S S S S
			· · · · · · · · · · · · · · · · · · ·	Add Remove Add Remove
 D. If amendin	g any other information, enter chang	e(s) here: (Attach additional	sheets, if necessary.)	Remove
				-
 Dated	Apríl 5 , 20	M	· · · · · · · · · · · · · · · · · · ·	-
		or authorized representative of a Mark Alhadeff or printed name of signee	a member	
		Page 2 of 2		
	Fi	ling Fee: \$25.00	H12000089559 3	3