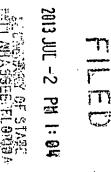
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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
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COVER LETTER

TO:

Registration Section **Division of Corporations**

THIRSTY CANVAS MUSIC, 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:

JASON P DZAMBA

Name of Person

C/O KRIS REGISTER

Firm/Company

2600 S DOUGLAS ROAD, SUITE 604

Address

CORAL GABLES, FL 33134-6100

City/State and Zip Code

rkris@registerco.com

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

For further information concerning this matter, please call:

Kris Register

at (305) 443-7200, Ext. 211

Area Code & Daytime Telephone Number

Name of Person

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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Y CANVAS MUSIC, LLC	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our re orida Limited Liability Company)	cords.)
Florida document number L12000064430		
This amendment is submitted to amend the following	ng:	2 R
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	ndment is submitted to amend the following: ending name, enter the new name of the limited liability company here: ame must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation we principal offices address, if applicable: I office address MUST BE A STREET ADDRESS) we mailing address, if applicable: address MAY BE A POST OFFICE BOX) mending the registered agent and/or registered office address on our records, enter the name of the new it agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u></u>	
B. If amending the registered agent and/or r	egistered office address on our record	s, enter the name of the new
registered agent and/or the new registered office	audress nere:	
Name of New Registered Agents		
New Registered Office Address:	P. Fl. I	
	Enter Florida	sireei aaaress
_		
	City	Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
MGMR	CHARLES B TORRELLAS	1123 N 19TH AVENUE	Add
•		HOLLYWOOD, FL 33020	Remove
			Remove
•		<u> </u>	ाम त्या हिं
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove
			Add
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			Add
			Remove
			Add
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			Add
<u> </u>			
			Remove

If amending a	ny other information, ente	r change(s) here: (Attach additional sheets, if no	ecessary.)
			
. —			
:d	JULY 1	2013	
		Wambus.	
		member of authorized representative of a member JASON P DZAMBA	
		Typed or printed name of signee	
		Page 3 of 3	a 2
		Filing Fee: \$25.00	2013 JUL
			-2 Pl