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## **COVER LETTER**

TO: Registration Sec Division of Corp		•		
SUBJECT:	Animal Music Name of Limi	ted Liability Company		
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please return all correspon	ndence concerning this matter t	o the following:		
	Albert	O FORINGS Name of Person		
	Animal	HUSIC LLC Firm/Company		
	2730 Su	J 3rd Ave Svitte 1	<i>∞</i>	<del>7</del> .8
	<u> Hiami</u> Fl	OFIGO 33129 City/State and Zip Code	<del></del>	THE 10 PH 2: 17
		animal miami. Com o be used for future annual report notifi	cation)	O PR
For further information co	oncerning this matter, please ca	11:		72.
Alberto F	<u>URINCIS</u> Person	at (305) 860 - Area Code Daytime	Telephone Number	<u></u> ,,
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MATT	MC ADDRESS.	CTDEET/COUDIN	ND ANDRESS.	

MAILING ADDRESS: Registration Section Division of Corporations 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

<u>Animal</u>	Music LLC
(Name of the Limite	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited List Florida document number <u>L 12000927</u> .  This amendment is submitted to amend the follow.  A. If amending name, enter the new name of	owing:
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE)	T ADDRESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I  B. If amending the registered agent and/oregistered agent and/or the new registered office Name of New Registered Agent:  New Registered Office Address:	or registered office address on our records, enter the name of the new
	MiQMi , Florida 33129
New Registered Agent's Signature, if changing R	City Zip Code
provisions of all statutes relative to the prope accept the obligations of my position as regis	d agent and agree to act in this capacity. I further agree to comply with the er and complete performance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S. Or, if this document is registered office address, I hereby confirm that the limited liability change.  If Changing Registered Agent, Signature of New Registered Agent  Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = R $AMBR = R$	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Faundo Fines	2730 SW 3rd Ave Ste 100	Add
		Niami FL 33129	Remove
			Change
MGR	Alberto Furinas	2730 SW 3rd Ave Ste 100	_ <b>⊠</b> Add
		miami FL 331291	Remove
		·····	Change
MGR	Emonuel Hovaghimian	2730 SW 3rd Ave Ste 100	<b>K</b> Add
	Ç	Migmi FL 33129	Remove
			Change
			유 Add ?:
			Remove
			Change
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an effective date ote: If the dat	if other than the date of is listed, the date must be spect inserted in this block does tive date on the Department.	rific and cannot be s not meet the a	pplicable statuto	ory filing require	ments, this date wil	ursuant to 605.0207
e record spe The 90th da	cifies a delayed effec ly after the record is	tive date, bu filed.	t not an effe	ctive time, at	12:01 a.m. on	the earlier of
	orugiay 17	<u>2017</u>	<del>1</del>			
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Filing Fee: \$25.00