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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEVEN H. HIBBE

Account Number : 120090000076

Phone Fax Number : (305)375-0966 : (305)375-0967

**Enter the email address for this business entity to be used 1.240 ptur annual report mailings. Enter only one email address please annual report mailings. Enter only one email address please

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUND FERRETTI 830, LLC

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COVER LETTER

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en in inc	œr.		RRETTI 830, LLC					
SUBJEC	LI:		Name of Lim	Name of Limited Liability Company				
The enci	osed	Articles of	Amendment and fee(s) are sub	mitted for fi	ling.			
			ndence concerning this matter		•			
			STEVEN H. HIBBE			727		
				Name	of Person			
			STEVEN H. HIBBE, P.A.					
				Flrm/	Company			
			1390 SOUTH DIXIE HIG	HWAY SU	ITE 1104			
Address						· · · · · · · · · · · · · · · · · · ·	•	
			CORAL GABLES, FL 33	146				
				City/State	and Zip C	ode		
			sh@yachtcounselor.com	to he wood for	- 	nual report natificati	(A.B.)	
For furth	ner ir	formation o	oncerning this matter, please c	•	r roture un	nuai report numem	on <i>)</i>	
		, HIBBE			305	3750966		•
		Name of	Person	at (rea Code	Daytime Te	lephone Number	-
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P.003/005

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUND FERRETTI 830, LLC		
(Name of the Limited Liability Comusa (A Florida Limited Li	is as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company villorida document number L13000048408	were filed on April 2, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	18	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		三二
New Registered Office Address:	Enter Florida street address	JUL 25 PA 12
	, Florida	がある。四十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
New Registered Agent's Signature, if changing Registered Agent:	•	2β C 000
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar with and , if this document is

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	MAUREEN DI GENNARO	52 ASPEN LANE, TRUMBULL,	
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			□ Add
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	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.	the
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ross	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	ľ;
1 500	Oth day after the record is filed.	
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