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T. HAMPTON

COVER LETTER

TO: Registration Sec Division of Cor			
CUBIFOT.	FASHION	NOW LLC.	
SUBJECT:	Name of Limit	ed Liability Company	• • • • • • • • • • • • • • • • • • • •
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	MICHAEL GERH	IARD JOHANNES GLE	ISSNER
		Name of Person	
	FASHION N	OW LLC.	
		Firm/Company	
	820 MERIDIA	AN AVE., SUITE	100
		Address	-
	MIAMI BEAC	CH, FL 33139	
		City/State and Zip Code	
	mg@michaelgleis	SSNER.COM o be used for fiture annual report notificati	on)
For further information co	oncerning this matter, please ca	·	···,
LENI AMBA	YAN	at (310)564 226	5
Name of	l'Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for th	e 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

CERTIFICATE OF AMENDMENT

OF

ARTICLES OF ORGANIZATION

OF

FASHION NOW LLC.

- I, Michael Gerhard Johannes Gleissner, the sole member of Fashion Now LLC., a Limited Liability Company organized and existing under the laws of the State of Florida, does hereby certify:
 - 1) That I am the sole member of Fashion Now LLC., a Florida Limited Liability Company,
 - 2) That an amendment to the Articles of Organization of this Limited Liability Company has been adopted by the Sole Member of Written Consent in lieu of a meeting as follows:

The name of the Limited Liability Company is amended to read as followings:

- 1. Name of the Limited Liability Company is Fashion One Music LLC.
- 3) That the wording of said amendment as approved and signed by Written Consent of the Sole Member is the same as that set forth above.
- 4) That this certificate shall become effective upon filing.

The undersigned further declares under penalty of perjury under the laws of the State of Florida that the statements contained in the foregoing certificate are true and correct of my knowledge.

Michael Gethard Johannes Gleissner

Sole Member

Date: November 11, 2013

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	orida street address
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

MGR = Manager

MGRM = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
		Provide and a	Add
			Remove
			— □
			Remove
		- Joseph St. Company of the Company	7113
		CREAR ARE	
		SECRE ARY CITY OF A DA	Remove
		FLORE CONTRACTOR OF THE CONTRA	Remove
		Or	Add
		•	
			Remove
			_ Add
			Remove
			_
			Add
			Remove
			Kemove

D. If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	November 1 2013
	Z. Z. Z. Z.
	Signature of a member or authorized representative of a member MICHAEL GERHARD JOHANNES GLEISSNER
	Typed or printed name of signee

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Filing Fee: \$25.00

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SECRETARY OF STATE
ORIGINAL