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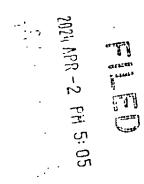
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tgaffe Home Services, 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:
Donald Taaffe JR Name of Person
THS ProAudio, LLC
3715-522 Aue No
St. Petersburg FL 33714 City/State and En Code Consider bass @ gingil. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donald Taaffe JR at (727) 564-8138 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Taaffe Home S	Services, LLC
(Name of the Limited Liability Company (A Florida Limited Lia	r as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number $\underline{L13000130339}$	vere filed on $9/15/20/3$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability THS Pro Audio, LLC	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	N A CONTRACTOR OF THE PARTY OF
	-p [7]
Enter new mailing address, if applicable:	. شام المسلم
(Mailing address MAY BE A POST OFFICE BOX)	. 0
	\$*
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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 605, 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 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>	<u>Name</u>	Address	Type of Action
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			
		□Change	
			
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			□Change

). If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(if an ef <u>Note:</u>	ive date, if other than the date of filing: [cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the recordis fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	March 29, 2024
	Signature of a member or authorized representative of a member
	Dang 12 R Tag He TR Typed or printed name of signee