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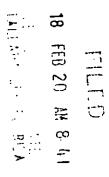
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#### **COVER LETTER**

### TO: Registration Section **Division of Corporations** Penny's Band Camp LLC SUBJECT: 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: Ashby Goldstein Name of Person Penny's Marching Arts Training Camp LLC Firm/Company 8726 97th Court Address Vero Beach, FL 32967 City/State and Zip Code pennyscampinfo@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ashby Goldstein 696-4001 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$25.00 Filing Fee **■** \$30.00 Filing Fee & □ \$55,00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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**

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Penny's Band Camp LLC

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 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>	<u>Name</u>	Address	Type of Action
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ecord specifies a delayed effective	date but not an effecti	ve time at 12:01 a	m on th	a aarli
e 90th day after the record is file		ve time, at 12.01 a.	iii. Oii cii	e carm
d February 16	2018			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00