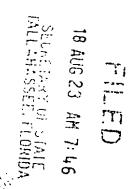
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(Requestor's Name)
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COVER LETTER

SHRIFCT:	First Con	inect LLC	
Division of Corporations SUBJECT: First Concert 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: Omac Scott			
The enclosed Articles o	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Omac Seatt	
		Name of Person	
		Firm Company	
	50	O. S. Federal HYL	11126
		Address	
	Halle	intale Beach F2 3	3009
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	aH:	
Omac	Scott	954 . (.99-1	(328
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Connect L	LC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LP 000153245</u> .	were filed on 9/24/1014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabile Scott Boy Music. The new name must be distinguishable and contain the ords "Limited Liability ords."	Group LLC ity Company," the designation "LLC" or the ab	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Ste. 15-720 3300: Hallandale Beach, F	7-4478
Enter new mailing address, if applicable:	P.O. Box 1126	
(Mailing address MAY BE A POST OFFICE BOX)	Hallandale Brach FL	. 33008
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	Finer Florida street address	The name of the new AUG 23 AH 7:
	, Florida 🚊	<u>1</u> 46
	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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			Change
			□ Remove
			Change
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			FLORIDA
			Change
			Remove
			☐ Change
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			□ Change

I have a new EIN- 83-1637414 from	the IRS which	
I would like to use for business purpose		
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tive date, if other than the date of filing:	(optional) e than 90 days after filing.) Pursuan	t to 605.0
If the date inserted in this block does not meet the applicable statutory filingment's effective date on the Department of State's records.	requirements, this date will not	be listed
ecord specifies a delayed effective date, but not an effective tir e 90th day after the record is filed.	ne, at 12:01 a.m. on the	earlier
θ		
d 8/20/2018		
Signature of a member or authorized representative o	f a member	

Page 3 of 3

Filing Fee: \$25.00