

L14000 190701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

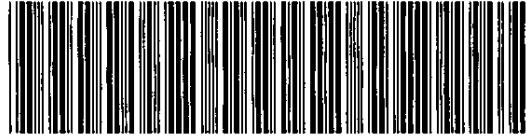
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700273474037

06/01/15--01007--005 \*\*25.00

RECEIVED  
FEDERAL BUREAU OF INVESTIGATION  
JUN 01 2015

15 JUN - 1 PM 12:56

FILED

JUN 02 2015

J SHIVERS

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Amen Music, 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:

Paula Kaminsky  
Name of Person

Firm/Company

312 Poinciana Island Dr  
Address

Sunny Isles, FL 33160  
City/State and Zip Code

KAMINSKYPAULA@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Kaminsky at ( 305 ) 926-0695  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

AMEN Music

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12-15-2014 and assigned Florida document number L14000190701.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)**

312 Poinciana Island Dr  
Sunny Isles Bch, FL 33160

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

312 Poinciana Island Dr  
Sunny Isles Bch, FL 33160

**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:**

Paula Kaminsky

**New Registered Office Address:**

312 Poinciana Island Dr

Enter Florida street address

Sunny Isles Bch, 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.*

Paula Kaminsky

**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>	<u>Address</u>	<u>Type of Action</u>
MNG	Rafael Arcaute	555 NE 34 Street 1703	<input type="checkbox"/> Add
		MIAMI, FL 33137	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MNG	Paula Kaminsky	312 Poinciana Island Dr	<input checked="" type="checkbox"/> Add
		Sunny Isles Bch, FL 33160	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MNG	Sonia Kaminsky	10275 Collins Ave. # 115	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MNG	Beatriz M. Gembowski de Kaminsky	10275 Collins Ave, #115	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MNG	Angel Kaminsky	10275 Collins Ave, #115	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<del>MNG</del>			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

15 JUN - 1 PM

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 05/08/2011.

Rafael Arcaute  
Typed or printed name of signer