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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	 e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:	Registration Se Division of Cor				
CHETC	Shout7 Proc	luctions			
Name of Limited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		Jason Miller			
		Sound Audio	Name of Person	······································	
		2027 Broyhill Lane	Firm/Company		
		Pensacola, FL 32526	Address	····	
		samantha@soundaudio.net	City/State and Zip Code		
		E-mail address: (to be used for future annual report notifi	ication)	
For furt	her information co	oncerning this matter, please ca	all:		
Samant	ha Miller		850 982-7082		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclose	d 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

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION DEC 13 PH 1: 26 OF

Shout7 Productions LLC

(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 L	ability Company	were filed on September 1, 2016	and assigned
Florida document number L16000164599			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	pility company here:	
Sound Audio LLC			
The new name must be distinguishable and contain the w	ords "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/ registered agent and/or the new registered of			r the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
·		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 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>	Name	Address	Type of Action
N/A	N/A	N/A	
			□ Remove
			☐ Change
			Add
			Remove
		-	
		- 	□ Remove
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ffective date, if other than the d an effective date is listed, the date must b lote: If the date inserted in this bloc	be specific and cannot be price	icable statutory filing r	(optional) e than 90 days after filing.) requirements, this date w	Pursuant to 605.0207 ill not be listed as
seament a checuve date on the Dep.				
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Page 3 of 3

Filing Fee: \$25.00