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COVER LETTER

Division of Corporations
SUBJECT: BUILD DEAL 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:
Trouble rotatin an correspondence concerning this matter to the following.
CLEM, MARK J Name of Person
BUILD IDEAL MUSIC, LCC
8186 Late San Carlos Circle
E-mail address: (to be used for future annual report solification)
For further information concerning this matter, please call:
Mar/c Jem at (239) 738 - 4522 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{array}{ c c c c c c c c c c c c c c c c c c c

MAILING ADDRESS: Registration Section

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

Sull DEAL MUSIC, (Name of the Limited Liability Company as it now appropriate Company	ears on our records.)				
The Articles of Organization for this Limited Liability Company were filed on $\frac{9/22/2016}{16000177007}$ and assigned					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability company	<u>here</u> :				
The new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "LLC" or the abbrev	iation "L.I	L.C."		
Enter new principal offices address, if applicable:	البياد سنس	: 23 Cut			
(Principal office address MUST BE A STREET ADDRESS)	20	iin oz			
	A SS				
Enter new mailing address, if applicable:		ס	П		
(Mailing address MAY BE A POST OFFICE BOX)	LOR OR	<i>\(\frac{1}{2} \)</i>	0		
	DA A	35			
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the	name (of the nev		
Name of New Registered Agent:					
New Registered Office Address: Enter	Florida street address				
	, Florida				
City		in 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 **Type of Action** Title Name **Address** SWABB, ANDREH M. 4225 DELPRADO BLVD. DADA CAPE CORAL, FL 33904 X Remove MGR ☐ Change □ Add _□ Remove _□ Change ☐ Add □ Remove ☐ Change □ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change U

Proceedings of the state of filings: (optional) (opt	<u>-</u>	
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Filing Fee: \$25.00