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	(Req	uestor's Name	_
	(Add	ress)	
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18 OCT 24 PH 6: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA

NOV 0 6 2018 S. YOUNG

COVER LETTER

	gistration Se ision of Cor			
CT TO THE AMP		TUDIO LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ldan Zareski		
			Name of Person	
		17100 N BAY RD # 1908	Firm/Company	
		SUNNY ISLES FL 33160	Address	
		idan.zareski@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For further is	nformation c	oncerning this matter, please co	all:	
Bernard Ma	rkowicz		305 3086398 at()_	
	Name o	f Person	at ()	Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25,00 }	illing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ S60 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 Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

(A Florida Limited L	lability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L17000074209	were filed on 04/03.	/2017	and assigned
This amendment is submitted to amend the following:		/	
A. If amending name, enter the new name of the limited liabi	lity company bere		
The new name must be distinguishable and contain the words "Limited Liabil	ity sompany," the desig	mation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET APIDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u>RD # 1</u> 908 FC 33160
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ur records. <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
	City	Florida	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 hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

SECIALIAN) OF STATE TALLAHASSEE, FLORIDA

TILED

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> itle</u>	<u>Name</u>	Address	Type of Action	
MGR	Bernard Markowicz	17100 N BAY RD #1908 SUNNY ISLES FL 33160	Add	
			□ Remove	
			☐ Change	
			□ Remove	
			Change	
			□ Remove	
			□ Change	
			□ Remove	18 18 18
			Change	8 OCT 24 PM 6: 23 SECRETAND OF STATE ALLAHASSEE, FLORIDA
			□ Add	OCT 24 PM 6: 23 RELANDER STATE ANASSEE, FLORIDA
			☐ Remove	FLOR
			Change	23 IUA
<u> </u>			🗖 Add	
			Change	

Page 2 of 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 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.			
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	NA I	18	
Dated October 12 . 2018	CRETAG LLAHASSE	001 24	ì
Signature of a member of authorized representative of a member		⊋ 6;	!
Typed or printed name of signee	~	6: 2	

Page 3 of 3 Filing Fee: \$25.00