117000079174

(Requestor's Name)	_				
(Address)	_				
(Address)	_				
(City/State/Zip/Phone #)	—				
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Document Number)					
Certified Copies Certificates of Status	_				
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COVER LETTER

		stration Sec sion of Corp					
CUD IF		MILL A WE	EK RECORDS, LLC				
SUBJEC	.I: <u>-</u>		Name of Lim	ited Liability Company			
The encl	osed	Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please re	turn a	all correspon	dence concerning this matter	to the following:			
			RUTHERFORD, CLYDW	'IN			
				Name of Person			
				Firm/Company			
Firm/Company 210 CITRUS TRAIL Address							
	210 CITRUS TRAIL						
BOYNTON BEACH, FL 33436						===	SEGI
				City/State and Zip Code		7 HAY -8	근감
			realpacogeneral@gmail.com			4	20 20 F
			E-mail address: (to be used for future annual report notif	ication)	77	
For furth	er int	formation co	ncerning this matter, please ca	all:		AM 9: 04	F 51/ FL0
RUTH	ERFO	ORD, CLYD		561 631-1781 at ()		2	RIDA
		Name of	Person	Area Code Daytime	Telephone Number		
Enclosed	l is a	check for the	e following amount:				
\$25.	00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Sta Certified Copy (additional copy is er	itus &	

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

MILL A WEEK RECORDS, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records. d Liability Company))
The Articles of Organization for this Limited Liability Compar	ny were filed on 04/10/2017	and assigned
Florida document number L17000079174		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability 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)		- FOR
		T FR
		艺 芸芸
Enter new mailing address, if applicable:		8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
(Mailing address MAY BE A POST OFFICE BOX)		3
		9 05
		9 6
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	·	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Flor	rida
	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>	<u>Name</u>	Address	Type of Action
AMBR	CHRISTOPHER RUTHERFORD	210 CITRUS TRAIL	≣ Add
		BOYNTON BEACH, FL 33436	□ Remove
	·		Change
AMBR	SASHA SMITH	817 MCLNTOSH ST	= Add
		WEST PALM BEACH, FL 33405	Remove
			Change A SECRETA
			8 25 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
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			Add
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Effective (If an effective	date, it other ve date is listed, ti	than the date ne date must be sp	of filing: ecific and can	not be prior to o	date of filing or	more than 90 d	_ (optional) ays after filing.) I	ursuant to 605.02	(3)(1
Note: If the	he date inserted	in this block do	es not meet	the applicable				ill not be listed	
document	's effective date	on the Departm	ient of State	s records.					
		delayed effe		, but not a	n effective	time, at 1	2:01 a.m. o	n the earlier	of:
	1-	1,-							
Dated +	4/30	<u> </u>							
,	1-2	1	7166						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00