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### **COVER LETTER**

го:	Registration Se Division of Cor			
SUBJE	ECT:	Point Point Name of Lim	Music, LLC ited Liability Company	<u> </u>
The en	closed Articles of	Amendment and fee(s) are sub.	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		MicA	Name of Person	
		Poin	t Point Music	<u> </u>
		5311 Bx	yshore Blud Address	
		Tam	pa FL 33611 City/State and Zip Code	
		Mithe @ 49 E-mail address:	e mamt. (om to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please co	ult:	
	Michael Name o	Battis Person	at ((009) 947 Area Code Daytime	- 7957 Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2:	5.00 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 TO ARTICLES OF ORGANIZATION

	ТО	$\varepsilon_{L}$
ARTIC	CLES OF ORGANIZATION	LEG
	OF	2017 NOV
Point Poin (Name of the Limited (A	Liability Company as it now appears on our record Florida Limited Liability Company)	2017 NOV -6 PR 12: 45  TALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liab	oility Company were filed on $8/4/17$	and assigned
Florida document number <u>L17000166</u> Z		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET.	ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered agent and/or the new registered offic		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre:	ss
		orida
	City	7ip 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, <u>enter the title, name, and address of each person\_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member						
<u>Title</u>	Name	Address	Type of Action			
MGR.	LAOMUEL Dufez	1015 Camulos street				
		Los Angeles, CA 90023	Remove			
			☐ Change			
MOR	Jordan (ardoso	1710 Buckingham Rd	Add			
		Los Angeles, CA 90019	Remove			
			Change			
<del></del>			Add			
			□ Remove			
			Remove			
		<del></del>	UPC) Add Ti			
			E. F. Strendy			
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ective date, if other t	han the date of fili	ng:		(option	nal) ling.) Pursuant to 605,0207
n effective date is listed, the te: If the date inserted	e date must be specific a in this block does not	nd cannot be prior to meet the applical	date of filing or more ble statutory filing re	than 90 days after ti equirements, this o	ling.) Pursuant to 605.0207 late will not be listed as
cument's effective date			, ,	•	
			an effective tim	ie, at 12:01 a.i	m. on the earlier of
he 90th day after	the record is filed	1.			
	<u> </u>				
ted October	5/	. 2017	_•		
	Ma.	0 1	hall.		
		/ //			
	Mulue ( Signature of	a member or author	zed representative of	a member	

Page 3 of 3

Filing Fee: \$25.00