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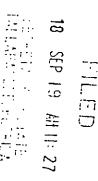
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COVER LETTER

SOFLO LIV	VE ENTERTAINMENT & SCI	ENIC LLC		
50000001.	Name of Limi	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Ricardo Adolfo Perez			
	SOFLO LIVE ENTERTAL	Name of Person NMENT & SCENIC LLC		
		Firm/Company		
1655 Brandywine Rd apt 8111				
	West Palm Beach, FL 3340	Address		
	drummaster4ever@gmail.co	City/State and Zip Code		
	E-mail address: (t	o be used for future annual report notific	cation)	
For further information e	oncerning this matter, please ca	ill:		
Ricardo/Rick Perez		561 704-3340 at ()		
Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for th	ne following amount:			
S25.00 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:

TO:

Registration Section Division of Corporations

> 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

SOFLO LIVE ENTERTAINMENT & SCENIC LLC

(Name of the Limi	ted Liability Company as it now apper (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited L Florida document number L18000211368	iability Company were filed on $\frac{\xi}{2}$	September 05, 2018 and assigned
This amendment is submitted to amend the fol	owing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET.4DDRESS)	
		<u> </u>
Enter new mailing address, if applicable:		SEP 1
Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the name of the new
Name of New Registered Agent:	Santos Montalvo	
New Registered Office Address:	1655 Brandywine Rd apt 8111	lorida street address
	West Palm Beach	Florida 33409

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.

City

If Changing Registered Agent, Signature of New Registered Agent

i. 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	Ricardo/Rick Perez	1655 Brandywine Rd apt 8111, West Palm Beach, FL, 33409	Add
			☐ Remove
			Change
MGR Ricardo	Ricardo/Rick Perez	1655 Brandywine Rd apt 8111. West Palm Beach, FL, 33409	■ Add
		(Any other titles except 2nd authority MGR)	■ Remove
		(only 1 title)	
	Santos Montalvo	1655 Brandywine Rd apt 8111,	
MGR2	- Santos Mentaryo	West Palm Beach, FL., 33409	Add
			□ Remove
			☐ Change
			Add
			Remove
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Effective date i	f other than the da	to of filings		(or	ational)
f an effective date is	s listed, the date must be	specific and cannot b	pe prior to date of filing	g or more than 90 days a	otional) fter filing.) Pursuant to 605.0207
Note: If the date document's effect	inserted in this block tive date on the Depai	does not meet the rtment of State's re	applicable statutory cords.	filing requirements,	this date will not be listed as t
ne record spec The 90th day	cifies a delayed ef y after the record	fective date, b is filed.	ut not an effecti	ve time, at 12:0.	1 a.m. on the earlier of
	9./17/	2013			
			·		1
Dated _			/	_/	<i>/</i> :
Dated _	In	- Mu	ials	Ja	at frame

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00