## L19 000040839

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Only States Elph Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, ,
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## **COVER LETTER**

TO: Registration Section

Division of Cor	rporations		
SUBJECT: W	n wood Mu Name of Lim	SIC Academ	YLLC
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Diana	a Commings Name of Person C Piano Studi	io
	DYYWIII	Firm/Company	<u> </u>
	1012 Ches	Address Bay	Ct
	Napies,  dcummin	FL 34120 City/State and Zip Code  45 Diano are to the used for future annual report upt	maid. am
For further information c	oncerning this matter, please c	9	
Diana	Commings f Person	at ( <u>845</u> ) 641 -	(0871 ne Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 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 S	Section	Street Address: Registration Se	
Division of C P.O. Box 632		Division of Cor The Centre of T	•
Tallahassee, I			ne Street Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wynwood Music	Academy LLC	
4 ( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears on our fecords.) iability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number <u>L1900040839</u> .	were filed on 2 11 2019	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabile  Dynamic Piano Stu  The new name must by distinguishable and contain the words "Limited Liability or the new name must by distinguishable and contain the words "Limited Liability or the new name must by distinguishable and contain the words "Limited Liability or the new name of the limited liability or the new name of the new name of the limited liability or the new name of the limited liability or the new name of the ne	dio LLC	viation "L.L.C."
Enter new principal offices address, if applicable:	1012 Chesapeake	Bay (t.
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34120	)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1012 Chesapeake Naples, FL 3412	Bay Ct
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, <u>enter the name o</u>	f the new registered
Name of New Registered Agent:		26/2
New Registered Office Address:		
	Enter Florida street address	~ <del>````</del>
·	, Florida	1
N. D. J. J. J. J. G. J.	City	Zip Code:
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree	e 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 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 =	<b>Authorized Member</b>	

<u>Title</u>	<u>Name</u>	Address	Type of Action
	·····		DAdd
		·	□Remove
			□ Change
			□Add
			□Remove
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			□Remove
			□ Change

Effective date, if other than the date of filing:	_	
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Signature of a member or authorized representative of a member		
	Dated .	February 22 2621
		Signature of a member or authorized representative of a member
Diana Cumminas		Diana Curringo

Filing Fee: \$25.00