LIACCCCTFHII

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(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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DICONNELL

COVER LETTER

Registration Section Division of Corporations

SJECT:	Achercy (Crc.	ed Ciability Company	large "L.L.C."
	Amendment and fee(s) are subsidence concerning this matter		
,	_	R. JONES Name of Person	
		•	
	treg	UPDCY COCEPTS Film/Company	
	714 Terro	Nista St. Address	
	Brandon	City/State and Zip Code	
	frequency (E-mail address: 1	COLCENSIVE (Luces 6)	fication)
r further information co	ncerning this matter, please ca	all:	
LVan K Name of	JONES Person	at (613) 205 Area Code Daytim	e Telephone Number
closed is a check for the	e 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 Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO
ARTICLES OF ORGANIZATION
OF

Firequeray Concerts Bea	My Bar & large "L.L.C."
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
Articles of Organization for this Limited Liability Company v	vere filed on Warch, 19 JOI9 and assigned
ida document number <u>L1966ccc7411</u> .	
amendment is submitted to amend the following:	
f amending name, enter the new name of the limited liabil	ity company here:
Frequences Con	cepts "L.L.C."
new name must be distinguishable and contain the words Climited Liabilit	y Company." the designation "LLC" or the abbreviation "L.L.C."
er new principal offices address, if applicable:	714 Terra Vista St.
ncipal office address MUST BE A STREET ADDRESS)	Brandon, FL
	3351
er new mailing address, if applicable:	2000 E 12th Ave
iling address MAY BE A POST OFFICE BOX)	PO Bax 75735
	Tanpa, FL 33675
f amending the registered agent and/or registered office ac	ldress on our records onter the name of the new registeres
t amending the registered agent and/or registered office act the new registered office address here:	diress on our records, enter the name of the new registered
	2 × %
Name of New Registered Agent:	- 18 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
New Registered Office Address:	
New Registree Office Francisco	Enter Florida street address
	Floride D
	City Florida Code
Registered Agent's Signature, if changing Registered Agent:	E
reby accept the appointment as registered agent and agree	
visions of all statutes relative to the proper and complete pept the obligations of my position as registered agent as pr	
g filed to merely reflect a change in the registered office a	ddress. I hereby confirm that the limited liability

pany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

R = Manager IBR = Authorized Member

<u>le</u>	<u>Name</u>	Address	Type of Action
			
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
· <u> </u>			
			□Remove
			□Add
			□Remove
			□Change

amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
<u>. </u>	
	
	
fective date, if other than the date of filing:	5.0207 (3) ed as the
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after is filed.	r the
ted October 7, 2026.	
Mu	
Signature of a member or authorized representative of a member	
Typed or printed name of signee	