

(((H23000051073 3)))



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BORNAGAINERS MUSIC L.L.C.

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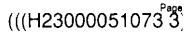
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Tallahassee, FL 32314

COVER LETTER



TO: Registration S Division of Co			,
ennieet.		AINERS MUSIC L.L.C.	
SUBJECT:		nited Liability Company	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249 :	STE 220	
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	
	EFILE 234@INCFILE.CO E-mail address; (M to be used for future annual report o	otification)
For further information of	concerning this matter, please of	all:	
LOVETTE DOBSON		88846234	53
Name of Person		Area Code Dayt	ime Telephone Number
Enclosed is a check for t	he 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 Addre Registration		<u>Street Address:</u> Registration S	Section
Division of C P.O. Box 632	Corporations	Division of C The Centre of	orporations

(((H23000051073 3))

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ВО	RNAGAINERS MUSIC L.L.C.	
(Name of the Limited (A	Liability Company as it now appears on our records. Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L20000057765	pility Company were filed on 02/20/2020	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
BENE & LOT LIMITED LIABILITY COMPANY		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO		
B. If amending the registered agent and/or reg agent and/or the new registered office address		e name of the new register
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		023
	Enter Florida street address	CD CD
	, Flor	
	City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the region pany has been notified in writing of this change in the region pany has been notified in writing of this change in the region pany has been notified in writing of this change in the	and complete performance of my duties, and ered agent as provided for in Chapter 605. F. gistered office address, I hereby confirm that	I am familiar with and S. Or, if this document is
	If Changing Posistared Ament Signature of S	Sua Darii tarad Amar

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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			☐Change
			F1Add
			□Remove
			□Change
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□Change

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Effective date, if other than the df in effective date is listed, the date mu. Note: If the date inserted in this b document's effective date on the f	lock does not	meet the applic	table statutory	or more than 90 tiling requirem	_ (optional) days after filing.) Prents, this date wi	irsuant to 605.0207 (3); If not be fisted as the
	.,		•			
the record specifies a delayed effecti- cord is filed.	ve date, but no	ot an effective t	ime, at 12:01 a	i.m. on the earli	er of: (b) The 9	0th day after the
Dated February 08		2023				
						

Filing Fee: \$25.00

Typed or printed name of signee

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