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TO:

Registration Section

**Division of Corporations** TANDEM MUSIC PUBLISHING, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: KENT SIMILIEN Name of Person AVAST MUSIC PUBLISHING, LLC Firm/Company 6705 NE 5TH AVE. Address MIAMI, FL 33138 City/State and Zip Code STATE000@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KENT SIMILIEN Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee S30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## DocuSign Envelope ID: 70763E1E-E393-4F57-AFB5-2390822A54E0 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TANDEM MUSIC PUBLISHING, LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our r iability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number	0.4.70.47	<u></u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
AVAST MUSIC PUBLISHING, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6705 NE 5TH AVE.	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33138	
Enter new mailing address, if applicable:	6705 NE STH AVE.	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33138	• •
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>c</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street d	uddress
		. Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutionrovided for in Chapter (	es, and I am familiar with and 505, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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. 11 autending Authorized rerson(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
.——			□Add
			Remove
			Change
			□Add
			Remove
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). If amending any o	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
···	
	<del></del>
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(If an effective date is lis Note: If the date ins	ther than the date of filing:
he record specifies a d ord is filed.	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	JUNE 12 2020  Docusigned by:  ELLY SIMILLY  F23F3147DEDAACF
	Signature of a member or authorized representative of a member
	KENT SIMILIEN
	Typed or printed name of signee