L20000181319

(Reques	tor's Name)
(Address	s)
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(City/Sta	te/Zip/Phone #)
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(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:

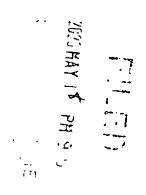




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7/14/23



COVER LETTER

TO: Registration Se Division of Cor			
	AZZIN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DANTE GUZZI		
		Name of Person	
		Firm/Company	
	5651 MICHELANGELO		
		Address	
	CORAL GABLES, FL 33	146	
	FERNOSPAZZIN@GMAI	City/State and Zip Code L.COM	
	=	to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
DANTE GUZZI		305 240-0365 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	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 Addres Registration S		Street Address: Registration Se	ection
Division of C	Corporations	Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number L20000181319 This amendment is submitted to amend the following:	and assigned
Florida document number <u>L20000181319</u> . This amendment is submitted to amend the following:	and assigned
This amendment is submitted to amend the following:	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
FERNO MUSIC LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevia	
Enter new principal offices address, if applicable:	2023 HAY
Principal office address MUST BE A STREET ADDRESS)	= -
	<u> </u>
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	<u>;:</u>
	·

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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
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Page 2 of 3

				
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ective date, if other than the reflective date is listed, the date must tel. If the date inserted in this blument's effective date on the D	st be specific and cannot be prior ock does not meet the applic	to date of filing or more the able statutory filing req	(optional) an 90 days after filing.) Pursua uirements, this date will no	ant to 605.020° ot be listed as
record specifies a delayed The 90th day after the rec		ot an effective time	, at 12:01 a.m. on th	e earlier o
	2023			
May 14 red				
ted May 14	(1) i	<u> </u>		
ded May 14	Signature of a member or auth	orized representative of a	member	

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Filing Fee: \$25.00