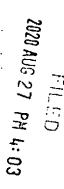
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COVER LETTER

TO:

Registration Section Division of Corporations

LOUD DIS	TRIBUTION, LLC				
SOBILICAT.	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:			
	THOMAS U. GRANER			- •	
		Name of Person		2020	
		2020 AUG 27 PM 4: 03			
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	<u>-</u>	27	
	1699 S FEDERAL HIGHV	VAY		70	
		Address		<u>.</u>	
	BOCA RATON, FL 33432	2		03	
		City/State and Zip Code			
	TOM@GRANERLAW.CO				
	E-mail address: (to be used for future annual report notif	ication)		
For further information of	concerning this matter, please c	all:			
IVY COLON		561 750-2445			
Name o	of Person	at () Area Code Daytime	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)	Certificate Certified Co	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of To 2415 N. Monroe	porations)	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOUD DISTRIBUTION, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JULY 23, 2020 and assigned Florida document number $\underline{\underline{L20000217173}}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LOUD MUSIC GROUP, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address. Enter Florida street address

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
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Offective date, if other than the date of filing: I an effective date is listed, the date must be specific and cannot be prior to date Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	of filing or more than 90 days after filin atutory filing requirements, this da	l) g.) Pursu te will n	ant to 6 ot be li	05.0207 isted as
record specifies a delayed effective date, but not an effective time, at d is filed.	12:01 a.m. on the earlier of: (b)	The 90th	day at	fter the
Pated August 13, 2020.	 -,			
Signature of a member or authorized	representative of a member			
of a the moet of authorized to significant or authorized to	representative of a member			

Filing Fee: \$25.00