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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JETGANG RECORDS LLC

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JUN - 7 2023

COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT:		G RECORDS LLC	
	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:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249 S	STE 220	
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	
	EFILE1234@INCFILE.CO.		
	E-mail address; ()	to be used for future annual report no	itication)
For further information c	oncerning this matter, please ea	ali:	
LOVETTE DOBSON		888-462-34	
Name o	f Person	at ()	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JETGANG REC	ORDS LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on	our records.)		
(A Fronta Ellined)	rabinty Company)			
The Articles of Organization for this Limited Liability Company	were filed on	08/21/2020	and assi	gned
Florida document numberL20000258950				
rionga document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
•	mey company nege.			
JETGROUP ENTERTAINMENT LLC				
The new name must be distinguishable and contain the words "Limited Liabil	ny Company, the design	nation "LLC" or the abb	reviation "L.L	C
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	-			
Enter new mailing address, if applicable:	<u> </u>			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office a	ddress on our recor	ds, enter the name	of the new	registered
agent and/or the new registered office address here:				
		<u>.</u>	~3	
Name of New Registered Agent:			023	
New Partietand Office Address			=	
New Registered Office Address.	New Registered Office Address: Enter Florida street address !			
			۵,	-
	City	, Florida <u></u>	Zip Code	<u>r</u>
Nam Hamistanad taanti's Vinnatuus if shanning Danistanad taant.	City	.	up Chile	
New Registered Agent's Signature, if changing Registered Agent:		· - -	-	
Thereby accept the appointment as registered agent and agree	e to act in this cape	icity. I further agre	re to compl	ly with the
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.		,		•

If Changing Registered Agent, Signature of New Registered Agent

6/5/2023 21:47:36 CDT 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> <u>Name</u> <u>Address</u> Type of Action _____ []Change _____ □Change _____ □Change \square Add □Remove _____ □Change

_____ □Remove

_____ □Change

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record specifies a delayed effective	date but not an eff	ective time, at	12:01 a.m. on t	he carfier of th	N The 90th day	cafter the
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Filing Fee: \$25.00