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COVER LETTER

TO: Registration Division of C	n Section Corporations		
	D ENTERTAINMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
	INCFILE.COM LLC		
		Firm/Company	
	17350 STATE HWY 249	STE 220	tatus &
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information	on concerning this matter, please c	all:	
LOVETTE DOBSON	1	888 462-3453 at ()	
Nan	ne of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	
P.O. Box 6	on Section f Corporations	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

R VIVID ENTERTAINMENT LLC

(<u>Name of the Limited Liabi</u> (A Flori	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability	y Company were filed on 12/29/2020 and assigned
Florida document number L21000006637	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	limited liability company here:
BEAUTIFUL SOUL ENTERTAINMENT LLC	
he new name must be distinguishable and contain the words "Li	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 ADD	DRESS)
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	
R If amonding the registered agent and/or register	ered office address on our records, <u>enter the name of the new regis</u>
	
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gent and/or the new registered office address here	
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent:	Enter Florida street address

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>	<u>Name</u>	Address	Type of Action
			
			Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
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n effective date is listed, the dote: If the date inserted in	this block does not	a cannot be prior to meet the applicab	date of filing or more le statutory filing r	equirements, this d	late will not be listed
cument's effective date or	the Department of	State's records.		•	
ecord specifies a delayed o	effective date, but no	t an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
is filed.					
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Bonn	Signature of a	member or authoriz	zed representative of	a member	