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COVER LETTER

то:	Registration Sec Division of Corp			
SUBJEC		H HOLDINGS LLC		
SOBJEC	- I:	Name of Lim	ited Liability Company	
The encl	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		ADAM JADUSINGH		
			Name of Person	
			Firm/Company	
		425 S 50TH ST		
		-	Address	
		TAMPA, FL 33619		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		AJADUSINGH@GMAIL.C		
		E-mail address: ()	to be used for future annual report notif	ication)
For furth	ner information co	oncerning this matter, please ea	all:	
ADAM	JADUSINGH		813 361-9196 at ()	
	Name of	f Person	Area Code Daytime	: Telephone Number
Enclosed	l is a check for th	ac following amount:		
■ \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S		Street Address: Registration Sec	ction

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

JADUSINGH HOLDINGS LLC	
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)
	Company were filed on DECEMBER 30TH 2020 and assigned
lorida document number <u>L21000009068</u>	<u></u> .
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the lin	mited liability company here;
IY KARAOKE GUY LLC	
ne new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADD	DRESS)
The gran office data ess widos 1921 of the same	
nter new mailing address, if applicable:	
<i>lailing address MAY BE A POST OFFICE BOX)</i>	
during duriess state DE 3 1 031 QLITCE DO.M	
If amending the registered agent and/or register	red office address on our records, <u>enter the name of the new registo</u>
gent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	, Florida

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager		
AMBR =	Authorized	Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
			□ Remove
			□Change
			∐Add
			Remove
			☐ Change
			□Add
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		, 	□Add
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			□Add
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			□Change

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				*
E. Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De	a be specific and cannot be ock does not meet the ap	oplicable statutory filir	(optional) nore than 90 days after filing.) Puring requirements, this date will	rsuant to 605,0207 (3)(I I not be listed as the
f the record specifies a delayed b) The 90th day after the reco		t not an effective	time, at 12:01 a.m. on	the earlier of:
Dated MARCH 8TH	2021			•
Dated		· ·		

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Typed or printed name of signee