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S. CHATHAM

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COVER LETTER

TO: Registration S Division of Co			
Playback	Studios LLC	,	
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.		
Please return all corresp	ondence concerning this matter to the following:		
	Filing Angela		
	Name of Person		
	ZenBusiness, Inc.		
	Firm/Company		
	5511 Parkerest Drive, STE 103		
	Address		
	Austin, TX 78731		
	City/State and Zip Code		
	fulfillment@zenbusiness.com		N 5
	E-mail address: (to be used for future annual	l report notification)	2 J
For further information	concerning this matter, please call:		DIVISION OF A
Filing Angela	844 49 at ()	93-6249	DIVISION OF CO.
Name	of Person Area Code	Daytime Telephone Number	PM 3: 05
Enclosed is a check for	the following amount:		10 _{K/S}
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee Certificate of Status ☐ Certified Copy tadditional copy is en	Certificate Certified C	of Status &

MAILING ADDRESS:

TO:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Playback Studios LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records a Limited Liability Company)	<u>>-</u>)
The Articles of Organization for this Limited Liability Colorida document number 1.21000105514	Company were filed on 3/04/2021	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lim	nited liability company here:	
		22 0
he new name must be distinguishable and contain the words "Lin inter new principal offices address, if applicable:	nited Liability Company," the designation "LLC"	or the abbreviation "L. 1388 C. 2000 C
Principal office address MUST BE A STREET ADDI	RESS)	
nter new mailing address, if applicable:		1156 1156
Mailing address MAY BE A POST OFFICE BOX)		
		-
. If amending the registered agent and/or regisegistered agent and/or the new registered office add		s, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	«
~ 		orida
	730)	ray com

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Hariet Desouza		
		3351 nw 55th street Fort Landerdale , FL 33309	
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ffective date, if other than the d an effective date is listed, the date must be total. If the date inserted in this blococument's effective date on the Dep	k does not meet	the applicab	date of filing or e statutory fil	more than 90 daing requireme	_(optional) uss after filing. uts, this date v	Pursuant will not b	to 605,020 e listed a
e record specifies a delayed The 90th day after the reco		, but not a	ın effective	e time, at 13	2:01 a.m. o	on the e	earlier (
ated July 13	<u> </u>	022					
/s/ Jeremy Valladares	ignature of a mem						_

Page 3 of 3

Filing Fee: \$25.00