

L21000 118138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

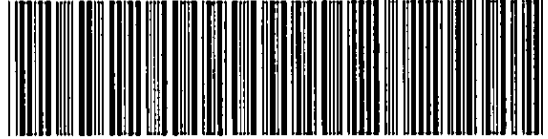
(Business Entity Name)

(Document Number)

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999 JUL 12 AM 6:19

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sounds Studio Group LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Israel Beato

Name of Person

Beato Pimentel & Associates PA

Firm/Company

8250 NW 25th St Unit 1

Address

Doral, FL 33122

City/State and Zip Code

beato@bpatax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Israel Beato

305 994-7276
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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**

Sounds Studio Group 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 03/12/2021 and assigned
Florida document number L21000118138.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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:

Beato Pimentel & Associates PA

New Registered Office Address:

8250 NW 25th St Unit 1

Enter Florida street address

Doral


City

Florida 33122

Zip Code

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>	<u>Type of Action</u>
MGR	Patrick Joint	12442 SW 193rd St	<input type="checkbox"/> Add
		Miami, FL 33177	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Joel Cabrera	1663 Pinefield Rd	<input checked="" type="checkbox"/> Add
		Marietta, GA 30066	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Rafael A. Guzman	14986 NW 87th Ct	<input checked="" type="checkbox"/> Add
		Miami Lakes, FL 33018	<input type="checkbox"/> Remove
		(first name misspelled & update title)	<input checked="" type="checkbox"/> Change
AMBR	Ayojuan Co	3459 W 105th Place	<input type="checkbox"/> Add
		Hialeah Gardens, FL 33018	<input type="checkbox"/> Remove
		(please update title)	<input checked="" type="checkbox"/> Change
AMBR	Brian A. Paulino	1300 S Miami Ave PH 4909	<input type="checkbox"/> Add
		Miami, FL 33130	<input type="checkbox"/> Remove
		(please update title)	<input checked="" type="checkbox"/> Change
AMBR	Marino A Victoria	109-44 54 Ave	<input type="checkbox"/> Add
		Corona, NY 11368	<input type="checkbox"/> Remove
		(please update title)	<input checked="" type="checkbox"/> Change

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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

On the line requesting change on previous page, it is just a correction on the name which was misspelled, one of the MGR is currently showing: Rafeal A Guzman, which needs to be corrected to Rafael A. Guzman.

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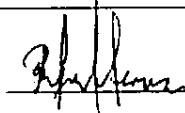
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 2nd 2021 _____



Signature of a member or authorized representative of a member

Rafael A. Guzman

Typed or printed name of signer