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COVER LETTER

_	ation Secti n of Corpo			•
BM SUBJECT:	IUSICTIN			
SUBJECT.			Name of Limited Liab	ility Company
Dear Sir or Mad	am:			
The enclosed Sta	atement of	Correction and fee(s) a	re submitted for filin	g.
Please return all	correspon	dence concerning this r	natter to the following	g;
Benjamin Walsh	n			
		Name of Person		-
Law Office of B	Benjamin V	Valsh		
		Firm/Company		-
501 S Reino Rd	Suite I #3	69		
		Address		-
Newbury Park, O	CA 91320			
	City	/State and Zip Code		-
chowdhury.shiri	n@gmail.	com		
E-mail add	ress: (to b	e used for future annual	report notification)	-
For further infor	mation co	ncerning this matter, plo	ease call:	
Benjamin Walsh	1		818 at (282-6243
	Name of	Person	Area Code	Daytime Telephone Number
Regist Divisi P.O. B	z Address: ration So on of Co Sox 6327 assee, Fl	ection rporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a ch	eck for th	e following amount:		
■\$25 Filing Fee	: 🗆	\$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	uant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.							
FIRS	ST: The name of the limited liability company is: BMUSICTIME, LLC	_						
SECO	OND: The Florida Document number of the limited liability company is: 1.21000122034	<u>. </u>						
THIE	Flectronic Articles of Organization							
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATES	MENT						
Ø	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and statement are as follows:	the corrected	đ					
	There is a typo in the name of the Registered Agent (Article III) and the Authorized Manager (Article IV). The							
	name in both articles should be "Shirin Chowdhury". The "r" is missing from her last name. It lists her n	ame as						
	"Shirin Chowdhuy". Similarly, the electronic signature has the same typo.							
	OR							
Ø	Was defectively signed. The manner in which the document was defectively signed and the appropass follows:							
			VISIO VISIV					
		- 20	40 PA					
	<u>OR</u>	2021 APR 12 PH 12:07	DIVISION OF CORPORA					
4	The electronic transmission of the record was defective.	707	ATE					
	Signature of Authorized Representative Date							
Signar accept	ature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered ting the designation).	ed agent mus	t sign					
I here provis obliga reflect	Registered Agent's Signature, if changing Registered Agent: eby accept the appointment as registered agent and agree to act in this capacity. I further agree to com- sions of all statutes relative to the proper and complete performance of my duties, and I am familiar wi ations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is be a change in the registered office address. I hereby confirm that the limited liability company has been s change. Registered Agent's Signature	the and accor	of the nerely writing					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)							