

h21000252403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

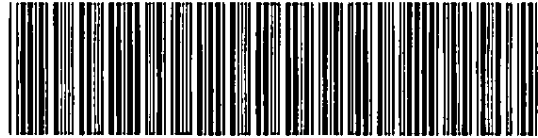
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 MAY 16 PM 4:18

CLERK OF COURT
JUDICIAL BRANCH

Name Change

JUN 13 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wilson Music 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:

Tina Mae Wilson

Name of Person

Wilson Music LLC

Firm/Company

1432 Crawford Dr.

Address

Apopka, FL 32103

City/State and Zip Code

wilsonmusicgroupllc@gmail.com

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

For further information concerning this matter, please call:

Tina M. Wilson

at (407) 701-5965

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

FILED
2022 MAY 16 PM 4:18
CORPORATION
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

April 26, 2022

2022 MAY 16 PM 4:37

TINA MAE WILSON
1432 CRAWFORD DRIVE
APOPKA, FL 32704

SECRETARY OF STATE
TALLAHASSEE, FL

SUBJECT: WILSON MUSIC LLC
Ref. Number: L21000252403

We have received your document for WILSON MUSIC LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews
OPS

Letter Number: 822A00009714

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Wilson Music, 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 6/1/2022

Florida document number L21000252403

This amendment is submitted to amend the following:

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

Wilson Music Group, LLC

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:

New Registered Office Address:

Enter Florida street address

City Florida Zip Code

By 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

11 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]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

Filing Fee: \$25.00