## Kal 000529713

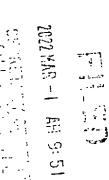
(Requestor's Name)
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Name Change

MAR 1 6 2022

## **COVER LETTER**

TO: Registration S Division of Co	Section orporations				
0ES3 MU					
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.			
Please return all corres	condence concerning this matter	to the following:			
	ANDRES F, REMOLINA				
		Name of Person			
0ES3 MUSIC LLC					
		Firm/Company			
1211 NW 154TH AVENUE					
		Address			
	PEMBROKE PINES, FL 3	33028			
City/State and Zip Code		_	2022 6.51		
	zeroestresmusic@gmail.com	n to be used for future annual report notifi	ention	2022 KAR	4
For further information	concerning this matter, please ca		eur.		98. d
ANDRES F. REMOLI	NA	954 736-6740 at ( )		- H 9:	ر مر س
Name	e of Person		Telephone Number	<u> </u>	
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0ES3 MUSIC LLC		
(Name of the Limited I	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 12/16/2021	and assignહું
Florida document number 1.21000529713	·	5
This amendment is submitted to amend the following	ing:	1 50
A. If amending name, enter the new name of th	e limited liability company here:	
ZEROES3 MUSIC LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company." the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)		
1 The spin office address is consistent and a spin of the spin of		
	<del>-</del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	····
		<u></u>
B. If amending the registered agent and/or regi agent and/or the new registered office address b		name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
The result of Margo Lineares.	Enter Florida street address	
	. Floric	la
-	Ciw	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this 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

<u>Title</u>	Name	Address	Type of Action
			□Add
		·	□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (0ptional) (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 02/25/22 Signature of a member or authorized representative of a member ANDRES F. REMOLINA Typed or printed name of signee