L22000033446

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COVER LETTER

Registration Section

Division of Corporations

TO:

Jay's Mus SUBJECT:	ic Academy, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	oondence concerning this matter	to the following:	
	Julian William Lens		
		Name of Person	
	Jay's Music Academy, LLC	C	
		Firm/Company	
	1011 Clearmont St NE-AP	T 207	
		Address	*************************************
	Palm Bay, Florida 32905		
	,	City/State and Zip Code	
	julianlens@gmail.com		
	E-mail address: (to be used for future annual report not	tification)
For further information	concerning this matter, please c	all:	
Julian William Lens		732 900-5126 at ()	
Name	of Person	Area Code Daytir	ne 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 Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

23 JUH 28 PM 1: 1 F

Jay's Music Studio, LLC		School Samuel 18 1 h	
(Name of the Limit	ted Liability Compa	ny as it now appears on our records) 1/200 05 57	
The Articles of Organization for this Limited L Florida document number L22000033946	iability Company	ny as it now appears on our records) 3/13/SSEE, FLORIDA were filed on 3/21/2022 and assigned	
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
Jay's Music Academy, LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		1011 Clearmont St NE-APT 207	
(Principal office address MUST BE A STREE	ET ADDRESS)		
		Palm Bay, Florida 32905	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office address		address on our records, enter the name of the new registere	
Name of New Registered Agent:	Hermeline Kyria Blanc-Lens		
New Registered Office Address:	1011 Clearmon	t St NE-APT 207	
	.	Enter Florida street address	

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.

City

Palm Bay

f 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>	Address	Type of Action
AMBR	Hermeline Kyria Blanc-Lens	1011 Clearmont St-APT 207 Palm Bay, FL 32905	= Add
			□Remove
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			🗆 Add
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(If an effective date is Note: If the date is	other than the date of listed, the date must be spe nserted in this block doo we date on the Department	ecific and cannot be prior es not meet the application	able statutory filing requ	(optional) n 90 days after filing.) Pursu irements, this date will no	ant to 605.0207 (3 ot be listed as th
ne record specifies a ord is filed.	delayed effective date,	but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th	day after the
June 21 Dated		2023			
Dateu			·		
	/ w	L'C	orized representative of a m		

Typed or printed name of signce