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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Rincon Stud	io , LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Fernando Rincon Medina		
		Name of Person	
	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. condence concerning this matter to the following: Fernando Rincon Medina Name of Person Rincon Studio , LLC Firm/Company 2421 Annacella Ave Address Kissimmee, FL 34741 City/State and Zip Code fernando-rincon@hotmail.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: na at (407 575-2138 of Person) Daytime Telephone Number		
		Firm/Company	
	2421 Annacella Ave		
		Address	
	Kissimmee, FL 34741		
	fernando-rincon@hotmail.c		· · · · · · · · · · · · · · · · · · ·
			tification)
For further information co	ncerning this matter, please ca	all:	
Fernando Rincon Medina		at ()	
Name of	Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	following amount:		
■ S25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

SEP 20 PM IN IS

Rincon Studio, 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 Con	mpany were filed on 07/25/2022	and assigned	
Florida document number L22000328785	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
Rincon Studio, LLC			
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LL	C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	 		
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of	office address on our records, <u>ente</u>	r the name of the new register	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addre	SS	
	, Florida		
	H	lorida	

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>	Address	Type of Action
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the I	lock does not meet th	he applicable stat	f filing or more than s utory filing require	(optional) 90 days after filing.) Pursuments, this date will n	ant to 605.0207 ot be listed as
e record specifies a delayed effecti d is filed.	'e date, but not an ef	fective time, at 11	2:01 a.m. on the ea	urlier of: (b) The 90th	day after the
Dated August 1st	202	22			
		,			
	Signature of a member	is or authorized	recentative of a man	.ha-	

Filing Fee: \$25.00