L22000528657

| (Requestor's Name) | |
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| | |
| (Address) | |
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| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
| | |
| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
| Special instructions to Filing Officer. | |
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Office Use Only



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2023 FEB -6 AH 8: 27 STOLE WALL OF STATE

COVER LETTER

| Division of Cor | porations | | |
|-----------------------------|---|---|--|
| | Custom LLC | | |
| UBJECT: | Name of Lim | ited Liability Company | |
| he analoged Articles of | Amendment and fee(s) are sub | mitted for filing | |
| | indence concerning this matter | - | |
| • | Ü | Ç | |
| | Shadner Joseph | | |
| | | Name of Person | |
| | | Firm/Company | |
| | 715 sw 14th avenue apt 4 | | |
| | | Address | |
| | Fort Lauderdale, Florida, 3 | 33312 | |
| | | City/State and Zip Code | |
| | Joseph.shadner@gmail.com | | |
| | E-mail address: (| to be used for future annual report not | ification) |
| or further information c | oncerning this matter, please c | all: | |
| Shadner Joseph | | 561 343-9214 at () | |
| Name o | f Person | Area Code Daytiπ | ne Telephone Number |
| Enclosed is a check for the | he following amount: | | |
| ■ \$25.00 Fiting 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) |
| | | | SO SE |

TO:

Registration Section

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

AH 8: 27

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Raw Audio Custom LLC | | |
|--|--|--|
| (Name of the Lim | ited Liability Company as it now appears on ((A Florida Limited Liability Company) | ur records.) |
| he Articles of Organization for this Limited I | iability Company were filed on 12/19/20 | and assigned |
| orida document number L22000528657 | | |
| nis amendment is submitted to amend the fol | lowing: | |
| . If amending name, enter the new name of | of the limited liability company here: | |
| he new name must be distinguishable and contain the | words "Limited Liability Company," the designa | ition "LLC" or the abbreviation "L.L.C." |
| nter new principal offices address, if appli | cable: | |
| Principal office address MUST BE A STRE | ET ADDRESS) | · <u> </u> |
| | · | |
| | | |
| nter new mailing address, if applicable: | <u></u> | |
| Mailing address MAY BE A POST OFFICE | BOX | |
| | | |
| | | |
| If amending the registered agent and/or gent and/or the new registered office address. | | is, enter the name of the new regist |
| pent and/or the new registered office additi | as nere. | |
| Name of New Registered Agent: | Shadner Joseph | |
| New Registered Office Address: | | |
| | Enter Florida st | reet address |
| | | , Florida |
| | City | Zip Code |

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.

Shaper Joseph

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

| MGR NINOSHKA HERNANDEZ 5841 SW 25TH STREET WEST PARK, FL 33023 Chan MGR LUIS M SANTIAGO 5841 SW 25TH STREET WEST PARK, FL 33023 Add CRence Chan Chan Chan Add CRence Chan Chan Chan Chan Chan Chan Chan Chan Chan | |
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| SECRIPTION OF STATE TALLASSEE, FL | ke T |
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| As there has been a mistake in the | filing process due to miscommunication. | |
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| ive date, if other than the date | e of filing: | (optional) |
| fective date is listed, the date must be s | pecific and cannot be prior to date of filing or more than 90 loes not meet the applicable statutory filing requiren | days after filing.) Pursuant to 605. |
| nent's effective date on the Depart | | iena, ena date will not be nate |
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| • | e, but not an effective time, at 12:01 a.m. on the earl | ier of: (b) The 90th day after |
| iled. | | s 2 |
| 1/31/2023 | 12:00 PM | SECRETAI Tallah |
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| S) in To | SEPh ature of a member or authorized representative of a memb | |
| 3/44/47 () . 1 Y | | |

Filing Fee: \$25.00