L2300087241

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer: FREE AMENDMENT DUE TO Previous AMENDMENT FILED IN ERROR.

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FILED 2024 MAR - 7 PM I2: 51 SECRETARY OF STATE ALLAMASSEE, FILORIDA

Office Use Only

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COVER LETTER

TO:

TO:	Registration Se Division of Cor		
		Amazing	Alliance, LLC
SUBJE	CT:	Name of Lim	ited Liability Company
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.
Please	return all correspo	ndence concerning this matter	to the following:
			Kasey Kang
			Name of Person
			Amazing Alliance, LLC
			Firm/Company
			8849 Villa View Cir., #208
			Address
			Orlando, FL 32821
			City/State and Zip Code
			kaseyckang@gmail.com
		E-mail address: ()	o be used for future annual report notification)
For fur	ther information co	oncerning this matter, please ca	ill:
	Kasey	Kang	951 757-1145 at (
	Name o	f Person	Area Code Daytime Telephone Number
Enclose	ed is a check for th	ne following amount:	
□ \$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	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

Amazing Alli			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records. Liability Company))	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on February 17, 2023	and assigned	
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	ility company here:		
Sacred Harmonics, LLC			
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Inter new principal offices address, if applicable:	655 Bryn Mawr St., Orlando, F	1.3280	
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	1317 Edgewater Dr., Suite 345 Orlando, FL 32804	PH 12: 51	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address	-	
	. Florida		
	, Flor	ida 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.

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

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

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lfan e <u>Note:</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
	March 1 2024.
Dated	
Dated	
Dated	Signature of a member or authorized representative of a member