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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Corporations						
	GABY MUSIC LLC Name of Limited Liability Company						
SUBJECT:							
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ondence concerning this matter	to the following:				
		Gaby Borges					
			Name of Person	·			
		GABY MUSIC LLC					
			Firm/Company				
		9160 NW 122 Street, Suite	: 34				
			Address				
		Hialeah, Florida 33018					
			City/State and Zip Code				
		gabyborgesinfo@gmail.con	1 to be used for future annual report not	citication)			
For further i	nformation c	oncerning this matter, please c		,			
Gaby Borge		oneoning and matter, preuse c	786 214-1169				
Name of Person		at ()					
12 to 12	h- 1 A. A	6.11					
		ne following amount:	These on Million Proc. P.	C \$60.00 Elling Lan			
■ \$25,00 F	rung rec	☐ \$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) 			
Ma	iling Addres	is:	Street Address:				
Registration Section		Registration Section					
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GABY MUSIC LLC	
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{\text{April 18}}{\text{Plorida document number}}$.	9, 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office address on our recor	ds, enter the name of the new-regis
gent and/or the new registered office address here:	
	· :
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	no no
Enter Florida s.	treet address
	, Florida

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

Zip Code

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
MGR	JORGE M. BORGES	9160 NW 122 STREET, #34, HIALEAH, FL 33018	□Add
			Remove
			□Change
MGR	MARIA G. BORGES	9160 NW 122 STREET, #34, IIIALEAH, FL 33018	□Add
			Remove
		<u> </u>	□Change
			□Add
			□Remove
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an effe <u>ote:</u> i	ctive date is listed, the dat If the date inserted in the	n the date of filing: te must be specific and cann his block does not meet the Department of State	not be prior to date of fili the applicable statuto	(op ng or more than 90 days aft ry filing requirements, th	tional) er filing.) Pursuant to 605 nis date will not be list	5.0207 ed as
record Lis file		fective date, but not an e	ffective time, at 12:0	l a.m. on the earlier of:	(b) The 90th day after	r the
ated _	December 18th)23			

Typed or printed name of signee