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(Document Number)	
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TO:

Registration Section

Division of Cor	porations				
	ENTER ELECTRONICS LLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JOSE HALLAK				
		Name of Person		_	
		Firm/Company		_	
	8333 NW 53RD ST STE 4	50		1.4	
		Address			
	MIAMI, FL 33166			(A) 7: 03	
	3.0.1.1260	City/State and Zip Code		_ _{[1,} W	
	jhallak_12@hotmail.com E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
JOSE HALLAK		786 451 6738			
Name o	f Person	at () Area Code Daytin	ne Telephone Numbe	er	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &	
Mailing Addres Registration S		Street Address: Registration Sc	ection		
Division of Corporations		Division of Co	rporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUDIO CENTER ELECTRONICS LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our records.) (liability Company)	<u></u>
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.24000007410}{}$.	were filed on 01/03/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
	to Company and Market Market	72. W. L. C. P.
The new name must be distinguishable and contain the words "Limited Liabi		or the abbreviation (L.L.C.)
Enter new principal offices address, if applicable:	8333 NW 53rd ST STE 450	
(Principal office address MUST BE A STREET ADDRESS)	Doral, FL 33166	
F-4	5600 NW 72nd Ave Num 7653	." -
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33166	- 1111 G
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter th</u>	e name of the new registe
-		
New Registered Office Address:	Enter Florida street address	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

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
MGR	KALBAKDJIAN, MISAK	5391 SW 155TH AVE	∃ Add
		MIRAMAR, FL 33027	□Remove
			☐ Change
AMBR	HALLAK, JOSE	8333 NW 53RD ST STE 450	🗖 Add
		DORAL, FL 33166	□Remove
			⊒ Change
			□Add
			□Remove
			□Change
			- FAdd
			☐ Remove
			☐Change
		<u>-</u>	□Remove
			Change
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Tective date, if other than than effective date is listed, the date mote: If the date inserted in this ocument's effective date on the	ust be specific and cannot b block does not meet the a	e prior to date of filin applicable statutory	g or more than 90 day	s after filing.) Purst	uant to 605.0 of be listed
record specifies a delayed effect is filed.	ive date, but not an effec	tive time, at 12:01	a.m. on the earlier	of: (b) The 90th	n day after i
ADDH 23	. 2024	·············			
ated APRIL 23					
ated ATRIE 23	Jos	s Hallak			

Filing Fee: \$25.00