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(((H24000174543 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PELICAN MUSICAL PRODUCTIONS LLC

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T. LEMIEUX

MAY 1 6 2024

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ARTICLES OF AMENDMENT
ΤΌ
ARTICLES OF ORGANIZATION
OF

		, .		
Pelican Musical Productions LLC	inv as it now appreirs on our records.)	·····		
(Name of the Limited Liability Compa (A Florida Limited)	Gability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 1/19/2024	anc	lassigned	d
Florida document number L24000038576 .				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi		е арриялино	n "EdaC.	
Enter new principal offices address, if applicable: 17678 SW 31st CT				
(Principal office address MUST BE A STREET ADDRESS)	Miramar, FL 33029			
Enter new mailing address, if applicable:	***************************************			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>			
B. If amending the registered agent and/or registered office a	address on our records, <u>enter the n</u>	ame of the	ben Les	iste
agent and/or the new registered office address here:		5	24 H	
N. C.		<u>-</u>	A	7
Name of New Registered Agent:	 		<u></u>	
New Registered Office Address:	Enter Florida street oddress	<u> </u>	<u> </u>	<u> </u>
		1 65 -a :=1	ت ر	ע
	City , Florida	$r \ge i$	<u>۔</u> پہ	
	UNV			
New Registered Agent's Signature, if changing Registered Agent:	•	,		

Thereby 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>	<u>Address</u>	Type of Action
AMBR	Rene Garcia	17678 SW 31st CT	
		Miramar, FL 33029	■Remove
			DChange
			□ Add
			Remove
			Change
<u></u>			🗀 Add
			□Remove
			Change
·			
		· · · · · · · · · · · · · · · · · · ·	Remove
			□Change
			□ Add
			□Remove
			[] [] Change
			Dadd
			□Remove
			[]Change

i .	
E. Effective date, if other than the date of filing: (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.	17 (3)(b) is the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a milion the earlier of: (b). The 90th day after the record is filed	:
Dated 5/14 2024	
/s/ Maria E Garcia	
Signature of a member or authorized representative of a member	
Maria E Garcia Typed or printed name of signee	

Filing Fee: \$25.00