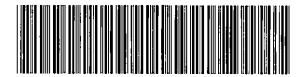
L24 000 185 727

(Requestor's Name)
(Address)
(Address)
(1001033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Danish Marka)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to a ming officer.

Office Use Only



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COVER LETTER

TO: • Registration Se Division of Cor			· Sand
	. (11.66.11.17)		mank Joi
SUBJECT:	NUFFMUZI		
	Name of Lim	ited Liability Company	/
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ANGE	FLA GABOUREL Name of Person	
		Name of Person	
	NU	FFMUZIK LLC Firm/Company	
		Firm/Company	
	9042 E.HIGI	HLAND PINES DR. Address	
	PALM BCH	+ GDNS FL 33418 City/State and Zip Code	
		UZIKLLC @GMAIL. to be used for future annual report notific	COM cation)
For further information c	oncerning this matter, please ca	all:	
ANGELA (GABOUR <i>EL</i>	at (561) 603 - 7 Area Code Daytime	7667
Name o	f Person	Area Code Daytime	Telephone Number
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)	☐ \$60.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Sect	ion
Registration of C		Division of Corn	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

NUFFMUZIK LI	LC	
(Name of the Limited Liability Company (A Florida Limited Li	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L34000185737</u> .	were filed on <u>APRIL</u> 30th, 3084 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ility company here:	
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "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:	STATE OF FLORE	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the new regis	
New Registered Office Address.	Enter Florida street address	
	. Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	performance of my duties, and I am familiar with and	

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>	Name	Address	Type of Action
MGR_	ANGELA GABOUREL	9042 É.HIGHLAND PINES DR.	MAdd
		PALM BUH GOWS PL 33418	□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Add
			□ Remove
			□ Change
			□ Add
		- 	□Remove
			Change
			□ Add
			□Remove
		 	□ Change
			□Remove
			□ Change

li an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	1
If an e <u>Note</u>	effective date, if other than the date of filing: 4/30/304 (optional) effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to timent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	a APRIL 20th, 2024
	Angela Balowel
	Signature of a member or authorized representative of a member
	ANGECA GABOUREC Typed or printed name of signee