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09/23/34--01022--004 **25.00



COVER LETTER

Division of Corporations
SUBJECT: LEVELS MUSIC Productions LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rafael Enrique. Dande Grevara
Firm Company
2700 N man? ave. #807
City/State and Zip Code Le vel your Sound a gmail. Com E-mail address: (to be used for future amusil eport notification)
For further information concerning this matter, please call:
habel 5. Defunde. C. at (786) 288 6345 Name of Person Area Code Daytime Telephone Number Area Code Daytime Telephone Daytime Telephone Number Area Code Daytime Telephone Daytime Telephone Daytime Telephone Daytime Telephone D
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee & □

TO:

Registration Section

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

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



Levels music Productions LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>06 26 24 24 24 26 26 24 26 26</u>
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 designation "LLC" or the abbreviation "LLC,"
Enter new principal offices address, if applicable: 2+00 N MWMY AVE.
(Principal office address MUST BE A STREET ADDRESS) UNIT 807. MICHA FL.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2700 N mjam? AVE UNIT 807, Miam? FL 33127
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: Parael. Enrique Dounce Grevara.
New Registered Office Address: 270 w mam? 4607 Enter Florida street address
Midwig Florida 33/27 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

<u>Title</u>	Name	Address	Type of Action
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			Remove
			□Change
			🗆 Add
			. □Remove
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Filing Fee: \$25.00