

M21 60000 709 2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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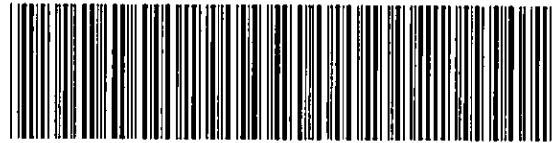
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 MAY 20 PM 2:03

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 05/20/2024

NAME: EXILE TOURING, LLC

TYPE OF FILING: APPLICATION AMENDMENT

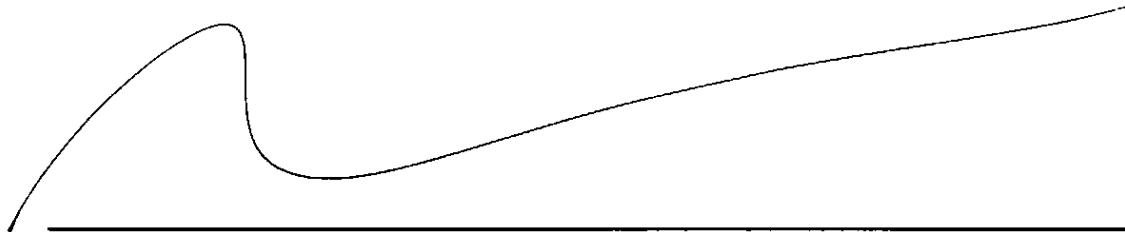
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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Exile Touring, LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M21000007097

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 9, 2021

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Zarpazo Touring LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: _____

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 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the laws of which this entity is organized.

Jeremy Norkin

0A5A10992090419

Signature of the authorized representative

Jeremy Norkin

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "EXILE TOURING, LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "AJA TOURING LLC", ON THE TWENTY-NINTH DAY OF FEBRUARY, A.D. 2024, AT 1:54 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "AJA TOURING LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ZARPAZO TOURING LLC", ON THE SIXTH DAY OF MAY, A.D. 2024, AT 1:15 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZARPAZO TOURING LLC", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.




Jeffrey W. Bullock, Secretary of State

5974325 8321
SR# 20242225971

Authentication: 203500299
Date: 05-17-24

You may verify this certificate online at corp.delaware.gov/authver.shtml

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AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZARPAZO
TOURING LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2021.

2021 JUN 4 PM 3:51




Jeffrey W. Bullock, Secretary of State

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SR# 20242225971

Authentication: 203500299
Date: 05-17-24

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