N150000000013

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000273086340

05/26/15--01028--018 **35.00

BIVISION OF SCREAK BEN 255 MAY 26 PM 2:53

Anula (10 6)2/15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	THE JAM ROOM M	USIC CENTER,	INC.		
DOCUMENT NUMBER:	N15000000643	·			
The enclosed Articles of An	nendment and fee are subn	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
MARK LAFONTAINE, M	ST				
		(Name of Contact	Persor	1)	
LAFONTAINE AND ASSO	OCIATES, INC.				
		(Firm/ Compa	any)		
2755 E. OAKLAND PARK	BLVD., SUITE 300				
		(Address))		
FORT LAUDERDALE, FL	33306				
	((City/ State and Z	ip Code	:)	
MARK@FLTAXMAN.CO	М				
E	-mail address: (to be used	for future annual	report i	notification	n)
For further information cond	erning this matter, please of	call:			
MARK LAFONTAINE, M	ST		954 at	ļ	495-4565
	(Name of Contact Person)		(Ar	ea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florid	la Depa	rtment of	State
■ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)		Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing A	address nt Section			Address	on

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE JAM ROOM MUSIC CENTER, INC.

(Name of Corporation as cur	rently filed with the	Florida Dept. of State)
N15000000643		
(Document Nu	mber of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida No</i>	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorpor	rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		20
). If amending the registered agent and/or registered o		ida, enter the name of the
new registered agent and/or the new registered offic	e address:	ຸ່
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		cept the obligations of the position.
	Signature of New Re	egistered Agent. if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	nes		
Type of Action (Check One)	Title		Name		Address
1) Change Add Remove				-	
2) Change Add Remove		_		-	
3) Change Add Remove		_		- -	
4) Change Add		_		-	
Remove 5) Change Add		_		-	
Remove 6) Change Add Remove		-		- -	
Kemove				-	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ΡI	JRPOSE.	ΔND	DISSOI	LITION	CI	ALISE:

SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND
SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO
ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501C3
OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.
UPON DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE
EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF THE INTERNAL REVENUE CODE, OR
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE
FEDERAL GOVERNMENT OR TO A STATE OR LOCAL GOVERNMENT FOR A PUBLIC PURPOSE. ANY SUCH
ASSETS NOT DISPOSED OF SHALL BE DISPOSED OF BY A COURT OF COMPETENT JURISDICTION IN THE
COUNTY IN WHICH THE PRINCIPLE OFFICE OF THE ORGANIZATION IS THEN LOCATED, EXCLUSIVELY
FOR SUCH PURPOSES OR TO SUCH ORGANIZATION OR ORGANIZATIONS, AS SAID COURT SHALL
DETERMINE, WHICH ARE ORGANIZED AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.

	05/15/2014	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
	5/2014	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s) l.	
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were pers.	
05/15/2010: Dated	· · · · · · · · · · · · · · · · · · ·	
Signature	Palu M	
have not bee	man or vice chairman of the beard, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
ANDY N	MENDEZ	
	(Typed or printed name of person signing)	
PRESIDI	ENT	
	(Title of person signing)	