## P11000039343

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MUSIC PR	ODUCTIONS B	Y JKL, INC		
DOCUMENT NUM	BER: P110000393	43			
	of Amendment and fee are su				
Please return all corre	spondence concerning this ma	tter to the following:			
	Johann Koller				
	Name of Contact Person				
	Firm/ Company 2100 Pelham Rd N				
		Address	<del></del>		
	St. Petersburg, F				
		City/ State and Zip Cod	e		
har	ns.koller@kollerus				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se cali;			
Jason Goldstein at (727) 384-2111  Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

## MUSIC PRODUCTIONS BY JKL, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000039343				_
(Docume	nt Number of Corporation (if l	(nown)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this FI	lorida Profit Corporatio	on adopts the followin	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional cor	orporated" or the a poration name must	bbreviation
B. Enter new principal office address, (Principal office address MUST BE A S				-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				SECRE SECRE
D. If amending the registered agent ar new registered agent and/or the ne		ss in Florida, enter the	name of the	T-9 PM
<u>Name of New Registered Agent</u>	2100 Pelham Rd	NI .	<del></del>	S. A.
	(Florida street		<del></del>	<b>50</b>
New Registered Office Address:	St. Petersburg	. Flor	<sub>eida</sub> 33710	
New Registered Agent's Signature, if ell hereby accept the appointment as registered.	(City)  hanging Registered Agent tered agent. I am familiarly i	h and accept the obliga	(Zip Code)	
. Si	gnature of New Registered A	ent, if changing		

Page 1 of 4

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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	<u> Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Sara Alina Koller	2100 Pelham Rd N
Add			St. Petersburg, FL 33710
Remove			
<u>.</u>			
2) Change			
Add			
Remove			
3) Change			
Add			<del></del>
Remove			
<u></u>			
4) Change			
Add			
Remove			
5) Change			
			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	<u>) nere</u> :		
			<del>-</del>	
				<del></del>
			<del></del>	
. If an amendment provides for an exch	ange, reclassificatio	n, or cancellation	n of issued shares	د
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not conta	ined in the amen	dment itself:	
	<u> </u>	<del>-</del>	<del></del>	
				-

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	
Dated October 7, 2014	
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
JOHANN LOUES	
(Typed or printed name of person signific)	21
(Title of person signing)	<del></del>