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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. BRUCE APR 04 2017

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee: Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Ŧ Dreamstime.com, LLC Art of Inc. File_____ LTD Partnership File_____ Foreign Corp. File____ L.C. File____ Fictitious Name File Trade/Service Mark Merger File_ Art. of Amend. File_ RA Resignation_ Dissolution / Withdrawal_ Annual Report / Reinstatement_ Cert. Copy_____ Photo Copy_____ Certificate of Good Standing_____ Certificate of Status Certificate of Fictitious Name_____ Corp Record Search_____ Officer Search__ Fictitious Search___ Fictitious Owner Search_____ Signature Vehicle Search_____ Driving Record_____ Requested by: SETH UCC 1 or 3 File_____ UCC 11 Search____ Name Date Time UCC 11 Retrieval_____ Will Pick Up Courier_

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dreamstime.com, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L05000103812	npany were filed on October 21, 2005	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·	<u></u>
(Principal office address MUST BE A STREET ADDRE	SS)	THE TANKS
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		A 9 20 SEE, FLORIDA
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre	red office address on our records, en	nter the name of the ne
•		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a.
	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

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>	<u>Name</u>	Address	Type of Action
MGR	Jeff Jones	1616 Westgate Circle	Add
_		Brentwood, TN 37027	□ Remove
	ı		☐ Change
MGR	Jeff Prescott	1616 Westgate Circle	
		Brentwood, TN 37027	□ Remove
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Effective date, if of	her than the date	of filing:	-i dua accision	(opti	onal) r filing.) Pursuant to 605.6	1107 <i>(</i> 1
Note: If the date ins document's effective	erted in this block d	oes not meet the ap	plicable statutory fi	ling requirements, thi	s date will not be listed	l as ti
the record specific) The 90th day a	es a delayed eff fter the record	ective date, but is filed.	not an effectiv	e time, at 12:01	a.m. on the earlie	r of:
Dated March 31		2017	·			
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