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COVER LETTER

Division of Corporations
SUBJECT: The Mind Of Rey Rey Creations 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:
Rey P. Rodriguez Name of Person
The Mind of Rey Rey LLC
7580 NW 5 St, #17642
Plantation/FL 33317 City/State and Zip Code info@themindofReyRey.com E-mail address: (to be used for future annual report notification)
info@themindofReyRey.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rey P. Rodrigue z at (954) 274-3965 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

The Mind Of Rey	Rey Creations LLC
The Mind Of Rey (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w Florida document number	were filed on $12/08/2014$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability The Mind Of Rey Rey The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices 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)	O CANADA
B. If amending the registered agent and/or registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent: New Registered Office Address: 7580	NW 5 St, #17642
Plant	NW 5 St, #17642 Enter Florida street address ation, 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Filing Fee: \$25.00