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| (| (Requestor's Name) |
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| | (Address) |
| (| (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| | (Business Entity Name) |
| (| (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
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SECRE FARY OF STATE OF STATE OF CORPORATION

N. CAUSSEAUX JUN 2 1 2017

COVER LETTER

| 10: Registration S Division of Co | | | |
|--------------------------------------|--|---|---|
| SUBJECT: GOLDIE: | MIAMI, LLC | | |
| | | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | DIEGO PEREZ | | |
| | - | Name of Person | |
| | GOLDIE MIAMI, LLC | | |
| | | Firm/Company | |
| | 10050 NW 6 TERRACE | | |
| | | Address | |
| | MIAMI, FLORIDA 3317; | 2 | |
| | goldiemiami2017@gmail.c | City/State and Zip Code | |
| | | to be used for future annual report not | ification) |
| For further information of | concerning this matter, please c | all: | |
| Diego Perez | | at () 281-5822 Area Code Daytin | |
| Name o | of Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |

MAILING ADDRESS:

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, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLDIE MIAMI, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/31/2017 and assigns.

This amendment number L17000118871

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "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)

B. If amending the registered agent and/or registered office 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 Florada street address

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 | Membe |

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------|--------------------|--|
| MGR | Diego Perez | 10050 NW 6 Terrace | <u></u> ■ Add |
| | | Miami, FL 33172 | □ Remove |
| | | - | |
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| Effective date, if other than the date of filing: 1 | · | | | | | | |
| Effective date, if other than the date of filing: O5/26/2017 | | | | ÷ | | ··· | |
| Effective date, if other than the date of filing: 05/26/2017 | | | | | | | 54 101/0/18 |
| Effective date, if other than the date of filing: 05/26/2017 | | | | • | \ , _ | | - I GE |
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| Effective date, if other than the date of filing: "an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 sole: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. | | , | | | | | ~ |
| Iffective date, if other than the date of filing: O5/26/2017 | | | | - | | | |
| Iffective date, if other than the date of filing: O5/26/2017 | | | · · · · · · · · · · · · · · · · · · · | | | | |
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Typed or printed name of signee

Filing Fee: \$25.00