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(Requestor's Name)

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(City/State/Zip/Phone #)

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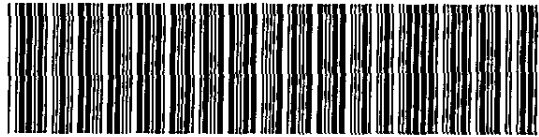
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

5/40/18/05

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Evil Excrusion 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:

Sasha Limpar

(Name of Person)

Evil Excrusion LLC

(Firm/Company)

1005 E Rose Ave

(Address)

Orange City, FL 32763

(City/State and Zip Code)

For further information concerning this matter, please call:

Sasha Limpar

(Name of Person)

at (386) 228-2932

(Area Code & Daytime Telephone Number)

X Enclosed is a check for the following amount: have already sent payment of \$25.00

☐ \$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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
05 OCT 18 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 23, 2005

EVIL EXCRUSION LLC
1005 E. ROSE AVENUE
ORANGE CITY, FL 32763

SUBJECT: EVIL EXCRUSION LLC
Ref. Number: L04000031444

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05 OCT 18 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for EVIL EXCRUSION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Although you can file an amendment at any time, articles of correction can only be filed within 30 business days of your initial filing. Enclosed is an amendment form for amending your articles of organization. Also enclosed is a form for changing your registered agent or agent's address, in case that information is also changing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 605A00053418

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Evil Excrusion LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on April 26, 2004 and assigned document number 104000031444.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Change of Address:

1005 E Rose Ave
Orange City, FL 32763

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated October 10, 2005.

Sasha Limpar

Signature of a member or authorized representative of a member

Sasha Limpar

Typed or printed name of signee

Filing Fee: \$25.00

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Evil Excursion LLC
2. The mailing address of the limited liability company is : ~~1000 E~~ 931 Springbank Ave
Orange City, FL 32763
3. Date of filing/registration in Florida April 26, 2004
4. Document number 104000031444

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Sasha Limpai
Name
931 Springbank Ave
Address
Orange City, FL 32763
City, State and Zip

6. The name and address of the new registered agent and/or office:

Sasha Limpai
Name
1005 E Rose Ave
Florida street address (P.O. Box NOT acceptable)
Orange City FL 32763
City, State and Zip

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Sasha Limpai
(Signature of a member or authorized representative of a member)

Sasha Limpai
(Printed or typed name of signee)

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 608, 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.

Sasha Limpai
(Signature of Registered Agent)

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