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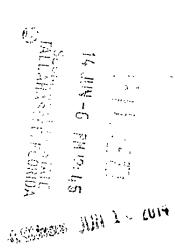
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To Whom It May Concern:

Enclosed please find the form to amend the Articles of Organization of a Florida Limited Liability Company. The current company name is Sarpes Fragranes, LLC who's document number is L08000057997 and was filed on 6/12/2008.

If you have any questions, comments, or concerns related to this filing please contact me at:

Joseph Lekach

Email: joseph@lekach.com

Mobile Number: 305-741-6540

296 Ocean Blvd.

Golden Beach, FL 33160

150

Jóseph Lekach

Kind/Regard:

COVER LETTER

то:		stration Sect ion of Corpo				
SUBJ	ECT·	Sarpe	s Fragrances,	LLC		
БОВ				ed Liability Company		
The en	closed A	Articles of A	nendment and fee(s) are subm	itted for filing.		
Please	return a	ll correspond	lence concerning this matter to	the following:		
			Joseph Leka	ch		
				Name of Person		
			The Sarpes (Group, In	C.	
				Firm/Company		
			296 Ocean E	Blvd.		
				Address		
			Golden Beac	h, FL 33°	160	
				City/State and Zip C	ode	
			joseph@lekach.coi	n be used for future and	nual report notification	00)
For fu	rther inf	ormation con	cerning this matter, please cal		nual report fibrineum	on,
Jos	sepl	n Leka	ach	_{at} (305)	7416540	0
		Name of P	erson	Area Code	Daytime Tele	ephone Number
				•		
Enclos	sed is a c	check for the	following amount:			
■ \$2	5.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing F Certified Copy (additional copy i	y	□ \$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, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sarpes Fragrances, LLC

company has been notified in writing of this change.

(148me of the Puni	(A Florida Limited Liability Company)	<u>J</u>
The Articles of Organization for this Limited L Florida document number L0800005799	iability Company were filed on 06/12/2008	and assigned
This amendment is submitted to amend the foll		
A. If amending name, enter the new name of	f the limited liability company here:	
Artcan LLC		
The new name must be distinguishable and end with the	words "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of the new	or registered office address on our records	, enter the name of the new
Name of New Registered Agent:	Joseph Lekach	4
New Registered Office Address:	296 Ocean Blvd.	NILLA NILLA
	Enter Florida street address	
	Golden Beach , Flo	rida 33160 ⁵
	City	Zip Gode
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registere	ed agent and agree to act in this capacity. I fur	ther agree to comply with the

Page 1 of 3

Propaging Registered Agent, Signature of New Registered Agent

provisions of all statutes relative to the proper and complete flerformance 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	Ianager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Joseph Lekach	296 Ocean Blvd.	A dd
		Golden Beach, FL 33160	□ Remove
MGR	Daniel Karten	4321 Casper Ct	= Add
		Hollywood, FL 33021	□ Remove
			□ Add
			□ Remove
		ALLAH ALLAH	Remove
		90 £ 60 £ 60 ± 60 ± 60 ±	□ Add □ Remove
		LORIDA A	,Remove
			□ Add
			Remove

	,	
		
-		
		
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e date this document is file	ed by the Florida Department of State)	(optional) ot be more than 90 days after
ted June 4	ed by the Florida Department of State) 2014 Signature of a member or authorized representat	
e date this document is file ated June 4	ed by the Florida Department of State) 2014	
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