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COVER LETTER

TO:	Registration Secondivision of Corp			
SUBJE	Extreme (Grass Worldwide, LLC		
SUBJE	CI;	Name of Limite	ed Liability Company	
The enc	losed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please re	eturn all correspon	dence concerning this matter to	o the following:	
		Rosie Gomez		
			Name of Person	·
			Firm/Company	
		14181 SW 143rd Cou	urt	
			Address	
		Miami, FL 33186		
			City/State and Zip Code	
		rgomez@easygrass.n	et be used for future annual report notifica	tion)
For furtl	her information co	ncerning this matter, please cal	·	,
Raul I	Martinez		305 234-5800	
	Name of	Person		elephone Number
Enclose	d is a check for the	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, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	WORLDWIDE, LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our re ited Liability Company)	<u>:cords.</u>)
The Articles of Organization for this Limited Liability Comp. Florida document number <u>L09000027073</u> .	oany were filed on 03/19/200	9 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
EASY MUI	•	
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 applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:		ords, enter the name of the ne
N. D. LOCT Aller		SS 1 SETTEME
New Registered Office Address:	Enter Florida street ad	
	City	Zip Gode
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>	
I haraby accent the appointment as registered agent and	agree to get in this canacity	I further agree to comply with th

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

	•
•	2

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:

<u>Title</u>	Name	Address	Type of Action
			□ Add
			□ Remove
			□ Remove
			□ Remove
			□ Add
			□ Remove
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