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| (Re | equestor's Name) | | | | |
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| (Address) | | | | | |
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| (Cit | ty/State/Zip/Phone | ? #) | | | |
| PICK-UP | MAIT | MAIL | | | |
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| Certified Copies | Certificates | of Status | | | |
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| Special Instructions to Filing Officer: | | | | | |
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COVER LETTER

| TO: Registration Sec Division of Corp | |
|--|---|
| SUBJECT: | bacca Minkoff Holdings UC Name of Limited Liability Company |
| The enclosed Articles of A | mendment and fee(s) are submitted for filing. |
| | dence concerning this matter to the following: |
| r rease return an correspon | defice concerning this matter to the following: |
| | Uri Minkoff |
| | Name of Person |
| | |
| | Firm/Company |
| | 404 Edgewood Ave. Address |
| | |
| | Cleanster, Florida 33755 City/State and Zip Code |
| | Cleawater, Florida 33755 City/State and Zip Code Uri @ rebocconnikoff, com E-mail address: (to be used for future annual report notification) |
| For further information cor | ncerning this matter, please call: |
| Name of I | Person at () Area Code & Daytime Telephone Number |
| Enclosed is a check for the | following amount: |
| \$25.00 Filing Fee | S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED 11 AUG 19 PM 2:55

| | | | | 11 AUG 19 PH 2:55 |
|--|---------------------------------------|---|-----------------------|--|
| Kebecca | linkoff | Holdings | <u>uc</u> | SEUNLIANT OF STATE |
| (Name of the Limited I | Liability Compar Florida Limited L | ny as it now appear liability Company) | rs on our record | SEUNITARY OF STATE SEUNITARY OF STATE SE STATE |
| The Articles of Organization for this Limited Lia | bility Company | were filed on $\sqrt{2}$ | aly 16, Ze | and assigned |
| This amendment is submitted to amend the follow | wing: | | | |
| A. If amending name, enter the new name of | the limited liab | ility company hei | <u>·e</u> : | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limi | ted Liability Compa | any," the designa | ation "LLC" or the abbreviation |
| Enter new principal offices address, if applica | ble: | | | |
| (Principal office address MUST BE A STREET | (ADDRESS) | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE B | (OX) | | | |
| | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered offi | | | our records, <u>e</u> | enter the name of the new |
| Name of New Registered Agent: | _ Dav | id Mink | s# | eet address ida <u>33755</u> Zin Code |
| New Registered Office Address: | 400 | f Edgewo | od Are. | |
| | ΛΛ | En | ter Florida stre | eet address |
| | _ Clear | water | , Flor | ida <u>33755</u> |
| | | 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 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|---------------|--|---|-----------------|
| <u>M GRM</u> | Uri Minkaff | 404 Edgewood Ave Clearwater, Fl. | Add X(Remove |
| <u>MGRU</u> | Yeluda Limited Parknishi | Yehrda (mited Partnorship 464 Edgerrond Ne Cleanson Fr. 33255 | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| , | | | Add Remove |
| D. If amend | ing any other information, enter change(| (s) here: (Attach additional sheets, if necessary.) | _ |
| | | | |
| | m) 1/ | | <u> </u> |
| Dated | 5 Hugust, Zon | | |
| | Signature of a member of | if authorized representative of a member To Former of signee | |

Page 2 of 2

Filing Fee: \$25.00