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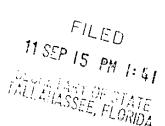
COVER LETTER

TO:

Registration Section

Division of Corporations								
CUDIECT		Diversified Interna	ational Enterpris	es L.I. C				
SUBJECT:			ted Liability Company	000 1.11.01				
771	da ex	1 16	Su - A - Sa - 1711					
The enclosed Ar	dicles of At	nendment and fee(s) are sub	omitted for filling.					
Please return all	correspond	lence concerning this matter	to the following:					
	Christopher R Cassano							
	Name of Person							
Firm/Company								
	183 Hibiscus Ln							
	Address							
	Deltona, FL. 32738							
			City/State and Zip Code	e				
Chris@pcinapickle.com E-mail address: (to be used for future annual report notification)								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
	Chris	e Caecano	. 913	24	14-8582			
Chris Cassano Name of Person		at (<u>813)</u> Area Co	Area Code & Daytime Telephone Number					
Parland in a de	1- C db	Call and an arrange						
		following amount:			□ # < 0.00 P(1' · - F- ·			
\$25.00 Filing	g Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy	e &	\$60.00 Filing Fee, Certificate of Status &			
			(additional copy	is enclosed)	Certified Copy (additional copy is enclosed)			
					(additional copy is ensured)			
MAILING ADDRESS: Registration Section		STRE	ET/COURIE	R ADDRESS:				
		ion Section	Registration Section					
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building					
Tallahassee, FL 32314			2661 Executive Center Circle					
			Tallahassee, FL 32301		1			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Diversified Interest	ernational Enterprise	s L.L.C.			
(<u>Name of the Limited Liabi</u> (A Flori	i <mark>lity Company as it now appea</mark> da Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on	3/31/2011 30	and assigned		
This amendment is submitted to amend the following	Ç.				
A. If amending name, enter the new name of the l	limited liability company he	<u>re</u> :			
	in a Pickle L.L.C.				
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "l	LLC" or the abbreviation		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET AD	DRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:					
New Registered Office Address:					
Enter Florida street address					
		, Florida			
	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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action** \square \wedge ddRemove ☐ Add Remove □ Add Remove ∏Add Remove \square Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 9/13/2011 Dated __ Signature of a member of authorized representative of a member Christopher R Cassano

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee