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COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	Hardrock	et Firework LLC			
	Name of Limi	ted Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	condence concerning this matter	to the following:			
		Carl Christy			
Name of Person Hardrocket Fireworks LLC					
22419 Martella Ave					
		Address			
		City/State and Zip Code			
	E-mail address: (arlchristy@ymail.com to be used for future annual report notific	ation)		
For further information	concerning this matter, please of	all:			
	Carl Christy	at (561) 9	29-8156		
Name of Person		Area Code & Daytime Telephone Number			
Enclosed 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 JAN 17 PM 1:38

Hardrocket F		
(Name of the Limited Liability Compa (A Florida Limited I	i <mark>ny as it now app</mark> Liability Compan	pears on our records.) y)
The Articles of Organization for this Limited Liability Company	were filed on _	October 3rd, 2011 and assigned
Florida document number L11000113902		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company l	<u>here</u> :
Hardrocket Fir	eworks LLC	
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Con	mpany," the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	Hardrocket Fireworks LLC	
(Principal office address MUST BE A STREET ADDRESS) 22419 Martella Ave		rtella Ave
	Boca Rator	n, FL 33433
Enter new mailing address, if applicable:	<u>-</u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		n our records, enter the name of the nev
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 **Name Address Type of Action** Add Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) I failed to add an S at the end of Hardrocket Firework LLC as was orginally. The new name will be Hardrocket Fireworks LLC January 14th 2012 Signature of a member or authorized representative of a member Carl Christy

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Filing Fee: \$25.00

Typed or printed name of signce