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| (Requestor's Name) | |
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| PICK-UP WAIT M | AIL |
| (Business Entity Name) | |
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| Special Instructions to Filing Officer: | |
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| cubico | | nend Plastics, LLC | • | |
| SUBJEC | .1: | Name of Lim | ited Liability Company | |
| The enclo | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please re | turn all correspo | ondence concerning this matter | to the following: | |
| | | Kristine W Taylor | | |
| | | | Name of Person | |
| | | Triple Diamond Plastics, 1 | LC | |
| | | | Firm/Company | |
| | | 748 Eagle Point Drive | | _ |
| | | _ | Address | |
| | | Venice, F1, 34285 | | |
| | | | City/State and Zip Code | |
| | | Taylor.kristine@comcast.ne | et to be used for future annual report | |
| For furthe | er information o | concerning this matter, please c | • | пописанону |
| | W Taylor | | 941 223-037 |) |
| | Name o | of Person | at () Area Code Da | ytime Telephone Number |
| Enclosed | is a check for t | he following amount: | | |
| ■ \$25.0 | 00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Addres | | Street Address | - |
| | Registration : Division of C | | Registration Division of | Section Corporations |
| | P.O. Box 632 | | | of Tallahassee |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENIMENT TO ARTICLES OF ORGANIZATION OF

Triple Diamond Plastics, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/15/2012}{1}$ Florida document number L12000037048 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TDP Holdings Group, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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