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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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| CONTACT: | Kim Weider | <u>ıbach</u> | | | | |
| DATE: | 09/23/13 | | | | | |
| REF. #: | <u>8901627</u> | | | | | |
| CORP. NAME: | FLOW HOL | <u>JSE ORLANDO,</u> | LLC changing it | s name to: | WAVE HOUSE FLO | ORIDA, LLC |
| () ARTICLES OF INCO () ANNUAL REPORT () FOREIGN QUALIFIC () REINSTATEMENT () CERTIFICATE OF C () OTHER: | CATION: | () TRADEMARK. () LIMITED PAR () MERGER | SERVICE MARK | () FICTI |) ARTICLES OF DISSOI ITIOUS NAME FED LIABILITY IDRAWAL | UTION |
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Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLOW HOUSE ORLANDO, LLC

company has been notified in writing of this change.

(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 w | ere filed on JULY 31, 2012 | and assigned |
|--|---|---|
| Florida document number L12000098444 | | |
| | | |
| This amendment is submitted to amend the following: | | 23 |
| A. If amending name, enter the new name of the limited liabili | y company here: | |
| WAVE HOUSE FLORIDA, LLC | | _ 🚉 👨 💛 |
| The new name must be distinguishable and end with the words "Limited "L.L.C." | Liability Company," the designat | ion "ELC" or the abbreviatio |
| 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 registered agent and/or the new registered office address here: | e address on our records, <u>en</u> | iter the name of the nev |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida stree | t address |
| | , Florid | In |
| | City | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet | to act in this capacity, I furthe e performance of my duties, ar | er agree to comply with and I am familiar with and |

If Changing Registered Agent, Signature of New Registered Agent

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

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 | | | |
|--------------------------------------|-------------|---------------------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| D. If | amending any other information, ente | er change(s) here: (Attach additional sheets, if necessary.) | |
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| | | | |
| Dated | September 20 | 2013 | |
| | Christa Pros | | |
| | Signature of a member or authorized representative of a member | | |
| | Christa D. Perez, Attorney in Fact Typed or printed name of signee | | |
| | | Page 3 of 3 | |

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