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| PICK-UP | WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE

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COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|---------------|------------------------------------|---|---|--|
| SHID IE | RIDICULO | OUS!, LLC | | |
| SUBJE | .CI: | Name of Lim | ited Liability Company | |
| The end | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please | return all correspo | ndence concerning this matter | to the following: . | |
| | | RICHARD N. NEEL | | |
| | | | Name of Person | |
| | | RIDICULOUS!, LLC | | |
| | | · · · · · · · · · · · · · · · · · · · | Firm/Company | · · · · · · |
| | | 227 LORA STREET | | |
| | | | Address | |
| | | NEPTUNE BEACH, FL | 32266 | |
| | | | City/State and Zip Code | |
| | | richardneel@bellsouth.net | | |
| | | E-mail address: (| to be used for future annual report notif | ication) |
| For furt | her information co | oncerning this matter, please ca | all: | |
| RICHA | ARD N. NEEL | | 904 537-4559 at () | |
| | Name of | Person | at () Area Code Daytime | Telephone Number |
| Enclose | ed is a check for th | e following amount: | | |
| ■ \$25 | i.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**

| RIDICULOUS!, LLC | | | | |
|---|--|---|---|------------|
| (Name of the Limited Liability Comp. (A Florida Limited | any as it now appears or Liability Company) | our records.) | | |
| The Articles of Organization for this Limited Liability Company | were filed on APRII | 26, 2013 | and assigned | |
| Florida document number L13000062412. | | | | |
| This amendment is submitted to amend the following: | | | teres de la companya | |
| A. If amending name, enter the new name of the limited liab | oility company here: | | | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the desig | nation "LLC" or the | abbreviation "L.L.C." | |
| 1/2002 OF 13 W/N 255 Enter new principal offices address , if applicable: | 7563 PHILIPS HIG | HWAY - SUITE I | 07 | |
| Principal office address MUST BE A STREET ADDRESS) | JACKSONVILLE, | FL 32256 | | <u>-</u> |
| | <u></u> | | | - |
| Enter new mailing address, if applicable: | | | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | | he new |
| | | | | |
| 3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent: | | ir records, eme | the name of the | <u>new</u> |
| New Registered Office Address: | | | | |
| The Windstelled Office / Radiess. | Enter Florida s | street address | | - |
| | | , Florida | | |
| | City | , Fiorida | Zip Code | - |
| New Registered Agent's Signature, if changing Registered Agent: | | | | |
| hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my provided for in Chap | duties, and I am oter 605 F.S. Or onfirm that the I | familiar with and if this document is mited-liability egistere Adent | |
| Page | lof3 | TATE | <u>ຫ</u> | |
| | | 7-2 | • • | |

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 |
|--------------|-------------|-------------------------|----------------|
| MGR | SHANA NEEL | 227 LORA STREET | □ Add |
| | | NEPTUNE BEACH, FL 32266 | ■ Remove |
| | | | Change |
| | | | Add |
| | | | □ Remove |
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| | | NEOTUNE BEACH FL 3226 |
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| etiv | e date, if other than the | date of filing: (optional) |
| | | t be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 ock does not meet the applicable statutory filing requirements, this date will not be listed |
| | | epartment of State's records. |
| ern | urd spacifies a delayed | l effective date, but not an effective time, at 12:01 a.m. on the earlier |
| | 90th day after the reco | |
| | - h. | 2014 |
| d _ | 5/14 | 20/6 |
| ~ – | | |
| | | The second secon |
| ~ - | | Signature of a member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00