L13000122095

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COVER LETTER

TO: Registration Sec Division of Corp	ction porations	٠.	
	DUCTS TV, LLC		
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	EDUARDO NARANJO		
	-	Name of Person	
	HERBAL WORLDWIDE	HOLDINGS, LLC	
	 	Firm/Company	···
	2828 BIRD AVENUE, SU	JITE 5 , PMB 304	
		Address	
	MIAMI, FL 33133		
		City/State and Zip Code	
	ED@INNOVATIVECAPIT		
	E-mail address: (i	to be used for future annual report notific	cation)
For further information co	ncerning this matter, please ca	all:	
EDUARDO NARANJO		786 302-2666	
Name of	Person	at (Telephone Number
Enclosed is a check for the	e 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

CARE PRODUCTS IV, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000122095</u>	y were filed on <u>8/28/2013</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abb	reviation "L.L.C."
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 o registered agent and/or the new registered office address her Name of New Registered Agent:		he name of the new
Timile of New Registered Agent.		AND CO
New Registered Office Address:	Enter Florida street address	SEE P
	City	Zb Cod
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 Changing Registered Agent, Signature of New Registered Agent

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	HERBAL WORLD WIDE HOLDINGS, LLC	2829 BIRD AVE	
		SUITE 5 РМВ 304	■ Remove
		MIAMI, FL 33133	☐ Change
MGR	ALEJANDRO HOLCH	4180 S. DOUGLAS ROAD	
		MIAMI, FL 33133	☐ Remove
			Change
			Add
			☐ Remove
			Change
			D Add
			Remove
			Change
			Add
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			☐ Change
			□ Add
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			☐ Change

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Filing Fee: \$25.00