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то:	Registration Se Division of Cor			
	Celestial Be	odiez.'LLC		
SUBJ	ЕСТ:		ited Liability Company	
		Amendment and fee(s) are sub		
		Zachary L. Catanzaro, Esq	i.	
		<u> , , , , , , , , , , , , , , , , , </u>	Name of Person	
		Law Offices of Zachary L.	Catanzaro, PA	
Firm/Company				
1489 W Palmetto Park Rd., Ste. 445				
			Address	
		Boca Raton, Florida 3348	7	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	ication)
For fu	rther information c	oncerning this matter, please c	all:	
Zachary L. Catanzaro, Esq.		sq.	561 807-1830	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclo	sed is a check for the	ne following amount:		
∠ \$2	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

Celestial Bodiez LLC		
(Name of the Limited Liabi (A Flori	lity Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation	"LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		The same of the sa
Principal office address MUST BE A STREET ADD	DRESS)	
	<u></u>	$\mathbb{P}^{\mathcal{S}}$
		ATE
Enter new mailing address, if applicable:		>
Mailing address MAY BE A POST OFFICE BOX)		
Mutang datatess may be at our office box;		
B. If amending the registered agent and/or reg	istered office address on our r	ecords, enter the name of the
registered agent and/or the new registered office ad		
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 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Celeste Braun	1090 Holland Drive, Ste. I	☑ Add
		Boca Raton, Florida 33487	Remove
			□ Change
MGR	Phillip Braun	284 NE 7th Street	Add
		Boca Raton, Florida 33432	
			Change
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			Remove
			☐ Change
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n effective date is listed, the date m	nust be specific and ca			0 days after filing.	
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record specifies a delay		te, but not an o	effective time, at	: 12:01 a.m.	on the earlier o
The 90th day after the re	ecord is filed.				
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	Signature of a me	ember or authorized r	representative of a men	nber 715	U

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Filing Fee: \$25.00