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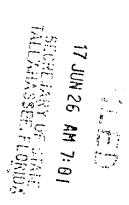
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PICK-UP WAIT MAIL
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COVER LETTER

	legistration Se Division of Cor			
CUDIECT	Rita Krauss	Fine Art Fla LLC		
SUBJECT		Name of Lim	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Katie Benjamin		
			Name of Person	
		Simses & Associates, PA	Name of Person States, PA Firm/Company Way, Suite 400 Address 33480 City/State and Zip Code seslaw.com il address: (to be used for future annual report notification) or, please call: 561 at (
			Firm/Company	· - ·
		251 Royal Palm Way, Suit	e 400	
			Address	
		Palm Beach, FL 33480		
			·	
		kbenjamin@simseslaw.com		
				ication)
For further	information co	oncerning this matter, please ca	all:	
Katie Benj	amin		_	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for th	e following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	□ \$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

Rita Krauss Fine Art Fla 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 04/28/2014 and assigned Florida document number _______L14000070923 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 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 Florida

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>	Name	Address	Type of Action
MGR	Herbert Krauss	100 Sunrise Avenue #615	
		Palm Beach, FL 33480	■ Remove
			Change
Member	Dand Krauss	4 Norsey Lane	型 Add
		Westport, a 00880	Remove
			Change
Member	Jasm Krauss	92 GoodHill Road	D Add
		Weston, CT 06883	□ Remove
		 	Change
			
			☐ Remove
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record specifies a delay he 90th day after the re			t an effectiv	e time, at 12:	01 a.m. on	the e	arlier
ed June 20	,	2017	_·				
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Page 3 of 3

Filing Fee: \$25.00