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COVER LETTER

| | gistration Sect ision of Corpo | | | |
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| | Chads Brand | | | |
| SUBJECT: | | Name of Limi | ted Liability Company | |
| | | mendment and fee(s) are subi | | |
| Please return | all correspon | dence concerning this matter t | to the following: | |
| | | Chad Masters | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 4829 Satsuma Ave | | |
| | | | Address | |
| | | North Hollywood, CA 916 | 01 | |
| | | | City/State and Zip Code | |
| | | chaddavismasters@gmail.co | | |
| | | E-mail address: (t | to be used for future annual report noti | fication) |
| For further in | nformation co | ncerning this matter, please ca | dl: | |
| Chad Maste | rs | | 863 661-6808 at () | |
| | Name of | Person | Area Code Daytim | e Telephone Number |
| Enclosed is: | a check for the | following amount: | | |
| ■ \$25.00 H | 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

| Chads Brand LLC | | |
|--|---|------------------------------|
| (<u>Name of the Limited</u> (A | Liability Company as it now appears on our records.) Florida Limited Liability Company) | |
| The Articles of Organization for this Limited Liab | oility Company were filed on July 7, 2014 | and assigned |
| Florida document number L14000107313 | · | |
| This amendment is submitted to amend the follow | ving: | |
| A. If amending name, enter the new name of t | he limited liability company here: | |
| TheGoodandTheChad LLC | | |
| The new name must be distinguishable and contain the wor | ds "Limited Liability Company," the designation "LLC" o | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicat | ole: | |
| (Principal office address MUST BE A STREET | ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE B | | · |
| Maining address MAT BE A FOST OFFICE BO | <u> </u> | |
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| B. If amending the registered agent and/or | a monistrated office address on our records | onter the name of the ne |
| B. It amending the registered agent and/or registered agent and/or the <u>new registered offi</u> | | |
| | | ZOIB) SECA |
| M. CONT. De des est America | | 製業力 |
| Name of New Registered Agent: | | SSEE FLO |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Flori | ida ida |
| | 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> | Address | Type of Action |
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| (If an eff Note: | we date, if other than the date of filing: 4/27/18 (optional) entire date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records. | 207 (: as t |
| the red b) The | ord specifies a delayed effective date, but not an effective time, at $12{:}01$ a.m. on the earlier 90th day after the record is filed. | of: |
| Dated | (1.1 hrs | |
| | Signature of a member or authorized representative of a member | |
| | Chad D Masters | |

Page 3 of 3

Filing Fee: \$25.00