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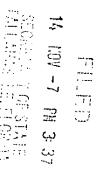
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COVER LETTER!

TO:	Registration Section
	Division of Corporations

Spritz Of The World S.O.W LLC

SUBJECT: Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	ANDRE BADEMOU	S				
		Name of Person				
	SPIRITZ OF THE W	ORLD S.O.W LLC				
		Firm/Company				
	1109 CAMDEN WA	Y				
		Address				
	KISSIMMEE, FL. 34	746		uī'as ·	ه ب	
		City/State and Zip Code			-	
	ANDRE@SPIRITZO	•		꿱퉵	1501	•
	E-mail address: (to be used for future annual report notific	ration)	杨慧	ι.	
For further information of	concerning this matter, please c	ali:			7 72	
ANDRE BADEMO	us	856 4186539			دې	
Name o	f Person		Telephone Number		-4 C3	
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certified C	of Status &		

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

SPIRITZ OF THE WORLD S.O.W. 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 Compar	ny were filed on SEPT	EMBER 24 2014 and assigned
Florida document number L14000149915		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	bility company here:	
The new name must be distinguishable and end with the words "Limited Li	ability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		,
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		100 19
		第5号 9号 通電: W
B. If amending the registered agent and/or registered		r records, enter the name of the new
registered agent and/or the new registered office address he	<u>ere</u> :	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida s	tuent addings
	Enter Florida s	neer quaress
	City	, Florida Ziv Code
Name Designation of Assert Company of the same Designation of the same of the	•	z.ip Coue
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent and as provisions of all statutes relative to the proper and complete	-	

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = . Manager

AMBR = Authorized Member Title <u>Name</u> **Address** Type of Action AP KIKELOMO HAMLETT 1815 STALLION CT WILLIAMSTOWN □ Add NJ.08094 Remove □ Add □ Remove □ Add □ Remove □ □ Add Remove ☐ Add ☐ Remove □ Add ☐ Remove

II AMEUUI	ng any other information, enter change(s) here: (Attach daditional sheets, if necessa
)
	
· · · · · · · · · · · · · · · · · · ·	late if other than the date of filings
	late, if other than the date of filing: date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after a document is filed by the Florida Department of State)
Dated	<u>11-5th</u> , 2014.
	the Land
•	Signature of a member or authorized representative of a member
	ANDRE BADEMOUS
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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