450000 2053

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COVER LETTER

TO:	Registration Se Division of Cor			
CHDIC		Holdings LLC		
SUBJE	СТ:		ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Rose Lynch, Controller		
			Name of Person	
		Scenthound Holdings LLC		
			Firm/Company	
		715 Commerce Way, Ste 1	0	
			Address	
		Jupiter, FL 33458		
			City/State and Zip Code	
		accounting@scenthound.co		
		E-mail address: (to be used for future annual report noti-	lication)
For fur	ther information c	oncerning this matter, please co		
Rose L	ynch, Controller		at () 203-2489	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	ne following amount:		
⊠ \$25	5.00 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

Scenthound Holding LLC (Name of the Limite)	d Liability Compa A Florida Limited I	ny as it now appears on our record- lability Company)	<u>\$</u> .
the Articles of Organization for this Limited Lia lorida document number L15000002053	and assigned		
his amendment is submitted to amend the follow	wing:		
If amending name, enter the new name of	the limited liab	ility company here:	
he new name must be distinguishable and contain the wo	rds "Limited Liabil	ity 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)		715 Commerce Way, Ste 10	. 5
		Jupiter, FL 33458	.5k ************************************
			14 (d)
nter new mailing address, if applicable:		715 Commerce Way, Ste 10	D. #
Mailing address MAY BE A POST OFFICE BOX)		Jupiter, FL 33458	- F
			· e-
. If amending the registered agent and/or the new registered off Name of New Registered Agent:			s, enter the name of the
New Registered Office Address:	715 Commerce		
New Registered Office Address.		Enter Florida street addres:	<u> </u>
	Jupiter	. Flo	orida ³³⁴⁵⁸
		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, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			
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ective date, if other than the date of fil effective date is listed, the date must be specific:	and cannot be prior to date of fil		ing.) Pursu	
e: If the date inserted in this block does no ument's effective date on the Department o	of State's records.	ry filing requirements, this d	ate will n	ot be listed
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record specifies a delayed effective he 90th day after the record is file		ctive time, at 12:01 a.r	n. on tr	ie earlier
ed May 24	2018			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00