

L150000 16302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

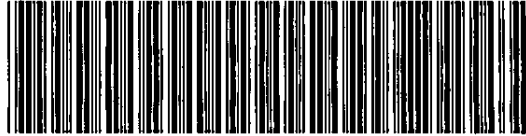
(Business Entity Name)

(Document Number)

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16 JUN 20 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Dinosaur Marketing 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 1-27-15 and assigned
Florida document number 215000016302

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)

2040 E Hampshire St
Inverness, FL 34453

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2040 E Hampshire St
Inverness, FL 34453

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:

Pam McKinney CPA

New Registered Office Address:

1471 N Lagoon Pt

Enter Florida street address

Inverness

Florida

34453

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 = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
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MGR	Garrett Breatrex	5344 W Customer Ct	<input type="checkbox"/> Add
		Lecanto, FL 34461	<input checked="" type="checkbox"/> Remove

			<input type="checkbox"/> Change
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MGR	Kevin Giguere	2040 E Hampshire St	<input checked="" type="checkbox"/> Add
		Inverness, FL 34453	<input type="checkbox"/> Remove

			<input type="checkbox"/> Change
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AMBR	Catherine Webb	2040 E Hampshire St	<input checked="" type="checkbox"/> Add
		Inverness, FL 34453	<input type="checkbox"/> Remove

			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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SECRETARY OF STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Garrett Groatvex no longer member
Gifted member certificate to
Kevin Ciguere

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E. Effective date, if other than the date of filing: 1-1-16 (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 18, 2016

X [Signature]

Signature of a member or authorized representative of a member

Garrett Groatvex

Typed or printed name of signer