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| e i i | DIECT. | TheLureOff | Happiness, LLC | | | | | | | |
| Name of Limited Liability Company | | | | | | | | | | |
| The | e enclosed | l Articles of a | Amendment and fee(s) are subt | mitted for filing. | | | | | | |
| Ple | ase return | all correspo | ndence concerning this matter | to the following: | | | | | | |
| | | | Alexander Zesch | | | | | | | |
| | | | | Name of Person | | | | | | |
| | | | Iurillo Law Group, P.A. | | | | | | | |
| | Firm/Company 5628 Central Avenue | | | | | | | | | |
| | | | | | | | | | | |
| | | | | Address | | | | | | |
| | | | St. Petersburg, FL 33707 | | | | | | | |
| | | | | City/State and Zip Code | | | | | | |
| | | | azesch@iurillolaw.com E-mail address: (t | o be used for future annual report notifi | cation) | | | | | |
| For | further ir | nformation co | oncerning this matter, please ca | | | | | | | |
| Alexander Zesch | | | | 727 895-8050 at () | | | | | | |
| | | Name of | f Person | Area Code Daytime | Telephone Number | | | | | |
| Enc | closed is a | i check for th | e following amount: | | | | | | | |
| | \$25.00 F | iling 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

TheLureOfHappiness, 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 April 1, 2015 and assigned Florida document number $\underline{L15000057827}$ 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 Cin

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> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------|--------------------------|-----------------|
| AMBR | Thomas Golden | 661 Central Avenue | ■ Add |
| | | St. Petersburg, FL 33701 | □ Remove |
| | | | ☐ Change |
| AMBR | Patricia Montgomery | 661 Central Avenue | Add |
| | | St. Petersburg, FL 33701 | ≡ Remove |
| | | | Change |
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| E. Effective date, if other than t (If an effective date is listed, the date a Note: If the date inserted in this document's effective date on the | block does t | not meet the | applicable | ate of filing o statutory fi | more than 90 ing requirer | (optional days after filinents, this day | l) ig.) Pursuant to 60. te will not be list | - 5.0207 ted as |
| If the record specifies a delay (b) The 90th day after the re | | | ut not ar | ı effective | e time, at | 12:01 a.m | . on the earli | ier of |
| Dated September 21 | | 2018 | | | | | | |
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Filing Fee: \$25.00