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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160

Phone Fax Number : (800)494-3124 : (305)675-2811

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H15000089094 3

SHARPER IMAGE CO			
(Name of the United Liability Company of A Florida Limited Liab	is it now appears on our re ility Company)	eords.)	
The Articles of Organization for this Limited Liability Company we Florida document number	re filed on04/01/	2015 and	d assigned
This amendment is submitted to amend the following:		·	
A. If amonding name, enter the new name of the limited liability	company here:		
The new name must be distinguishable and end with the words "Limited Liability	Company," the designation	"LLC" or the abbrevial	ion "T.L.C."
Enter new principal offices address, If applicable:			23
(Principal office address MUST BF A STREET ADDRESS)			<u> </u>
		> ⊼	A-0 "T
Enter new mailing address, if applicable:		ASSE	
(Mailing address MAY BE A POST OFFICE ROX)	7 12		3
· _		L 03	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	c address on our rec	cords, enter the us	· ·
Name of New Registered Agent:			
New Registered Office Address:	kintar Florida street a	dibrem	
		. Florida	
	//w	.,	'la da

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

Page 1 of 3

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<u>Title</u>	Name	Address	Type of Action
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E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of recoipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated APRIL 10 2015 Signature of a member or authorized representative of a nomber	. If amending any other information, enter change(s) here: (Ata	ach additional sheets, if recessor H15000089094 3
The effective date must be specific, cannot be prior to date of recoipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated APRIL 10 2015		······································
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	Dated APRIL 10 2015	· <i>[</i>
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