Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 : (561)694-8107 Phone Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one amail address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRAIGROM COMMERCE LLC

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Certificate of Status	:4.1	0
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Estimated Charge	\$	25.00

Electronic Filing Monu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRAIGROM COMMERCE LLC	•	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now inpears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 07/06/2015	and assigned
Florida document number L15000115421		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Digital Beauty Group LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the i	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 off	lce address on our records, enter	the name of the new
registered agent and/or the new registered office address here	; ig∵	
Name of New Registered Agent:		
New Registered Office Address:		5
	Enter Florida street address	> :
 	, Florida _	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		0

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 bereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

Title	<u>Name</u>	Address	Type of Action
			
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ective date, If other than the effective date is listed, the date mule: If the date inserted in this burnent's effective date on the D	lock does not meet the applic	zable statutory filing requirem:	_ (optional) days after filing.) Pursuani to 605. ents, this date will not be liste
record specifies a delaye he 90th day after the rec	d effective date, but no cord is filed.	ot an effective time, at 1	.2:01 a.m. on the earlie
March 5th	2013		= =
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	Signarire of a mornber or auth	onzed representative of a membe	r

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Filing Fee: \$25.00 .