## L15000139669

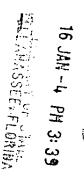
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## COVER LETTER

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TO: Registration Section Division of Corporation		· , •	
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	Creative	Strokau and M	iorkeling LLC
	28310 S	M 7410, COMF	. U
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525.00 Film, Fee D	1\$30 (4) Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is engineed)	Certificate of Status & Certified Copy (additional copy)

MAILING ADDRESS: Registration Section Division of Corp analogs P.O. Box 6327 Fallahasse, Fl. + 314

A,

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahnssee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	AND MARKETING LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on HUM 14,2015 and assigned	÷
Florida document number <u>L15000139669</u>		
This amendment is submitted to amend the following:	er <del>e</del> r et i	٠
A. If amending name, enter the new name of the limited liab	ility company here:	٠.,
	W CT	
The new name must be distinguishable and contain the words "Limited Liabil	Ity Company," the designation "LLC" or the abbreviation "LLC".	
Enter new principal offices address, if applicable:	TROO OM AND LANKI	•
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDEPUALE, FI	
	_5531/2	
For 19 14 14 15 15 15	OBSIG ELI AD LOUAT	,
Enter new mailing address, if applicable:	FOOT INUNCOUNTS EL SO	
(Mailing address MAY BE A POST OFFICE BOX)	102 UTMURRIHILL THE	. ,
•		43+
D. If an ending the projectional agent and/on majetonal a	Or in the second of the second	r S
registered agent and/or the new registered office address her	office address on our records, enter the name of the ne	* .
0	Fig. 49	11
Name of New Registered Agent:	U A. JOHNSON SE SE	
Manie of New Acgisteled Agent.	10100 010	
New Registered Office Address:	Enter Florida Street address	
raar	In un connic nazin	
<u> </u>	City Zin Code	
New Registered Agent's Signature, if changing Registered Agent	<u>E</u>	

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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