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(Reque	stor's Name)	
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Certified Copies	Certificates	of Status
Special Instructions to Filin	g Officer:	
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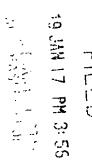
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COVER LETTER

TO:	Registration Se Division of Co			
	ERIN BLY	THE BEAN LLC		
SUBJ:	ECT:			
		Name of Lin	nited Liability Company	
The er	iclosed Articles of	Amendment and fee(s) are sub	omitted for tiling.	
Please	return all correspo	ondence concerning this matter	to the following:	
		ERIN CRAWFORD		
			Name of Person	
			Firm/Company	
		3576 BIRAGUE DR.		
			Address	
		WELLINGTON FL 33449)	
		ERINBCRAWFORD@GM	City/State and Zip Code IAIL.COM	✓
		E-mail address: (to be used for future annual report notifi	ication)
For fur	ther information e	concerning this matter, please c	all:	
ERIN	CRAWFORD		561 346-5597	
	Name o	of Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	he following amount:		
\$2	5.00 Filing 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

Erin Blythe Bean LLC				
(Name of the Limite	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were filed on Florida document number $\frac{L15000144929}{L}$.			and assigned	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :		
Erin Blythe Crawford LLC				
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the des	ignation "LLC" or the abbrevi	tion "L.L.	
Enter new principal offices address, if applica	ble:	<u>:</u> ,	9	
(Principal office address MUST BE A STREE)	ADDRESS)		JAH	<u>-</u>
			: -	
		<u></u>		İŋ
Enter new mailing address, if applicable:		- 1 	ـــــــــــــــــــــــــــــــــــــ	
Mailing address MAY BE A POST OFFICE I	<u></u>	<u> </u>	ကျ	
		-	01	
B. If amending the registered agent and/oregistered agent and/or the new registered off	ice address here:		name of	the n
Name of New Registered Agent:	Ern B. Cra	Witera		
New Registered Office Address:	Evin B. Crai	J2D(a street address		
	Wellington	Florida <u>3</u>	344°	<u>1</u>

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
MGR	Erin Blythe Crawford	3576 Birague Dr. Wellington FL 33449	
		33449	
			□ Remove
			■ Change
			
			Remove
			☐ Change
			Add
			☐ Remove
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			D Add
			Remove
			Change
			Add
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		- "	Change
			Add
			□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (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 Note: 1f 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 January 15 2019 Signature of a member of authorized representative of a member
ERIN (PAUTOCO Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00