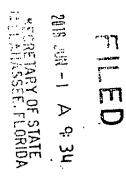
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JUN 0 2 2016 WARREN S MASON

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, A	INC.		East 6th Avenue. Tallahassee, Florida 32303 7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666					
	WALK IN							
		PICK UP:	06/01					
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1	FILING		Amendment					
, (CC	QUAN ORPORATE NA	TUM LEAP	FLORIDA, LLC					
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SPECIAL INSTRUCTIONS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUANTUM LEAP FLORIDA, LLC

(Name of the Limited Lia (A Flo	bility Company as it now appears on rida Limited Liability Company)	dur records.)	
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on 11/03/2	015	and assigned
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company here:		
Flying Panda Florida, LLC			
The new name must be distinguishable and contain the words "I	Limited Liability Company," the design	ation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			oraniero y note manuscularius antinantinantinantinantinantinantinanti
(Mailing address MAY BE A POST OFFICE BOX)	*****		
	***************************************		·····
registered agent and/or the new registered office a Name of New Registered Agent:	ddress here:		
New Registered Office Address:	<i>t</i>		
	Enter Florida s	reet address	
	t &	, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Register	ered Agent:		
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my d agent as provided for in Chap ered office address, I hereby c	duties, and I am ter 605, F.S. Or	familiar with and , if this document is
	If Changing Registered Agent,	Signature of New P	egistered Agen
	Page 1 of 3	LORIG	

	from our records:		
MGR = N $AMBR = A$	Aanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		***************************************	PREMOVE A Change

Typed or printed name of signee		ets, if necessary.)	ion, enter change(s) here: (Attach additional sh	If amending any other inform
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 60 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliest of the post day after the record is filed. Dated May 26 , 2016. Signature of a member or sutherized representative of a member Case Lawrence, AMBR				
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Page 3 of 3 Filing Fee: \$25.00		<i>P</i> .	-	