Division of Corporations Electronic Filing Cover Sheet

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.

(((H160000912183)))



H160000912183ADC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

Account Number : I20040000167 Phone : (305)377-0809 Fax Number : (305)377-0781

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

Email Address: amayor@pbyalaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

RAW WORLD INK, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

Electronic Filing Menu

Corporate Filing Menu

Help

APR 1 4 2016

Y SULKER

2816 APR 13 AM 10: 46

Fax Audit No. H16000091218 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAW WORLD INK, LLC		
(Name of the Limited Liability Company (A Florida Limited Lie	y as it now appears on our records.) shilly Company)	
The Articles of Organization for this Limited Liability Company w	vere filed on December 23, 2015	_ and assigned
Florida document number L15000211239		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
YELLO INK, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre	viation "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)		# 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
B. If amending the registered agent and/or registered office and/or the new registered office address here:		e name of the ner
Name of New Registered Agent:		
New Registered Office Address:		0
	Enter Florida street address	
	, Florida	Zip Code
	Clty	ггр Соив

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

4. . .

Fax Audit No. H16000091218 3

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>	Name	Address	Type of Action
			D Add
			□ Remove
			□ Change
			□ Remove
			□ Change
			□ Zod d □ Remove □ Clampe
			Change Adab
			Change
			□ Remove
			☐ Change
			DAdd
			□ Remove
			☐ Chángo

. D

E. Effective date, if other		 (optional)	10 1	Time way
		 100 mg/s	APR 3	y.*=n.
	 		16	

Page 3 of 3

Filing Fee: \$25.00