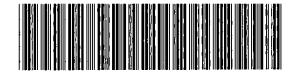
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(Address)			
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

2017 JUN 12 PH 3

S. WARREN JUN 1 2 2017

COVER LETTER

FO: Registration Section Division of Corporations						
SUBJECT: Rolling TRON LLC Name of Limited Liability Company						
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Paul Archiser Name of Person						
Rolling Iron LLC Firm/Company						
5355 EIKHAM Bluch						
Beverly Hills F 34465 City/State and Zip Code Paul Arduser D Vahou: Com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Paul Arduser at (352) 352 · 601 · 0709 Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

Rolling	Iron, LL				
(Name of the Limited Liab) (A Florid	lity Company as it now annears and Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Company were filed on 1 28/2010 and assigned Florida document number 114000026953					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company here	#			
The new name must be distinguishable and contain the words "Li	mited Liability Company," the des	gnation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	RESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		and the second s			
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		our records, enter the name of the new			
New Registered Office Address:					
	Ent er Fl orid	a street address			
	City	, Florida Zip Code			
New Registered Agent's Signature, if changing Register	•	Zip Code			
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the register company has been notified in writing of this change	t and agree to act in this co complete performance of n agent as provided for in Ch red office address, I hereby	ny duties, and I am familiar with and apter 605, F.S. Or, if this document is confirm that the limited liability			
	Page 1 of 2	. FLO F ST. ₩ FLO			
	Page 1 of 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>	<u>Name</u>	Address	Type of Action
AMBR	Paul Arduser	P. Title only	□ Add
			∠ Remove
			☐ Change
AMBR	John Rodesiler		
			Er Remove
			Change
***			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Change
			Add
		de la companya de la	Remove
			Change
			Remove
-,			12 49 H 3 50 ARTUS STATE ASSEE, FLORIDA
			Change

Please Remove the:	
Title of President for Pan	1 Ardise
$\overline{\mathbb{Q}}$	
Please Remove the 1 Title of V President for Jon	
11 The OF V President for John	n Kudesiler
- must have (A member Tit	10 only)
	······································
E. Effective date, if other than the date of filing:(option	ai)
(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 fil Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this d	ing.) Pursuant to 605.0207 (3)(b)
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.r (b) The 90th day after the record is filed.	n. on the earlier of:
(b) The sould day after the record is flied.	
Dated	· stemp
Pal Chilin	NEC 7
Signature of a member or authorized representative of a member	WI FI
Typed or printed name of signee	FILED 112 PH ARY DE ASSEE, F
	ω; ω;
Page 3 of 3	SO SO
Filing Fee: \$25.00	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)