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	egistration Section Section Section				
eud IE <i>c</i> y		ktion Pool Buying Group, LLC			
SUBJECT	ı	Name of Limi	ted Liability Company		
•		Amendment and fee(s) are submodence concerning this matter		·	
		Kellette Robinson			
			Name of Person		
		Graffiti Junktion Pool Buy	ing Group, LLC		
			Firm/Company		
		700 E. Washington St., Up	ostairs Unit		15 PER
			Address		16 OCT 31
		Orlando, Florida 32801			<u>م</u> الم
		kelli@graffitijunktion.com	City/State and Zip Code		CT 31 AM 7: 44
		E-mail address: (to be used for future annual report notifi	cation)	: -1
For furthe	r information c	oncerning this matter, please ca	all:		-
Kelli Rob	inson		407 245-7878 at ()		
<u> </u>	Name o	f Person		Telephone Number	_
Enclosed	is a check for th	he following amount:			
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing For Certificate of Standard Copy (additional copy is	Status &
	MAII	INC ADDDESS.	STREET/COURIE	ER ANDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Graffiti Junktion Pool Buying Group, LI	LC			
(Name of the Limited Li (A F	ability Compa orida Limited I	ny as it now appears on our records Liability Company)	.)	
The Articles of Organization for this Limited Liabili Florida document number L16000048349	ty Company	were filed on		and assigned
This amendment is submitted to amend the followin	g:			
A. If amending name, enter the new name of the	limited liab	ility company here:		
The new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the designation "LLC"	or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable	:	700 E. Washngton St. Upstairs	Unit	
(Principal office address MUST BE A STREET A.	DDRESS)	Orlando, Florida 32801	<u></u>	17.5°
Enter new mailing address, if applicable:		700 E. Washington St. Upstairs	s Unit	OCT 31
(Mailing address MAY BE A POST OFFICE BOX	Ō	Orlando, Florida 32801		7: 44
B. If amending the registered agent and/or registered agent and/or the new registered office			, enter the	name of the ne
Name of New Registered Agent:				
New Registered Office Address:	00 E Washing	ton St. Upstairs Unit		
		Enter Florida street address		
<u>o</u>	rlando	, Flo	rida <u>32801</u>	7. 6.1
		City	2	Zip Code

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 = A	Authorized Member		\
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ Change
			Add
			Remove
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Effective date, if other than the d f an effective date is listed, the date must be Note: If the date inserted in this blockdocument's effective date on the Dep	k does not meet the applica	to date of filing or more than able statutory filing requir	(optional) 90 days after filing.) Pursuant to 605 rements, this date will not be liste	.0207 ed as
e record specifies a delayed of The 90th day after the recor		an effective time, a	at 12:01 a.m. on the earlie	er of
	2016			
October 19th	,	<u> </u>		

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Filing Fee: \$25.00