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COVER LETTER

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TO: Registration Se Division of Cor				
	REE SOLUTIONS, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	GERARDO APONTE JR			
		Name of Person		
	GRAND TREE ADVERT	ISING SOLUTIONS, LLC		
		Firm/Company		
	16877 E COLONIAL DRI	VE #196		
	<u> </u>	Address		
	ORLANDO, FL 32820			कं निह
		City/State and Zip Code		哥 語
	GAPONTE05@GMAIL.CO			R2:
		to be used for future annual report notificati	on)	16 MER 23 AM 7: 47
For further information co	oncerning this matter, please co	ılt:		
GERARDO APONTE JE	R	321 663-1075 at ()		
Name of	f Person		ephone Number	<u> </u>
Enclosed is a check for the	ne following amount:			
□ \$25.00 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

GRAND TREE SOLUTIONS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\underline{\underline{MARCH}}$ 16, 2016 and assigned Florida document number L16000054414 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GRAND TREE ADVERTISING SOLUTIONS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Florida

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Typed or printed name of signee

Filing Fee: \$25.00