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| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | · #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| CUDI | | roup L.L.C. | | | |
| Name of Limited Liability Company | | | | | |
| The e | nclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please | e return all correspo | ndence concerning this matter | to the following: | | |
| | | Garret Vernon | | | |
| | | The 33rd Group L.L.C. | Name of Person | | |
| | | 3960 NW 33rd Ave | Firm/Company | | |
| | | Lauderdale Lakes Fl 33309 | Address | | |
| | | | City/State and Zip Code | | |
| | | GeeAnthonyMusic@Gmail E-mail address: (| .com to be used for future annual report notif | ication) | |
| For fu | orther information c | oncerning this matter, please co | all: | | |
| Garre | t Vernon | | 954 7091988 at () | <u></u> | |
| | Name o | f Person | Area Code Daytime | : Telephone Number | |
| Enclo | sed is a check for the | ne following amount: | | | |
| ■ Sa | 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

| any as it now appears on our rec Liability Company) | ords.) |
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| y were filed on 04/08/16 | and assigned |
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| Enter Florida street add | dress |
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| | bility company here: bility Company," the designation "I 1131 E Commercial Blvd S biffice address on our recore: 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

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 |
|--------------|-------------|---------|----------------|
| | | | _ □ Add |
| | | | □ Remove |
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| D. If amending any other inform | nation, enter change(s) here: (Attach additional sheets, if necessary.) |
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| E. Effective date, if other than t | ne date of filing: (optional) |
| (If an effective date is listed, the date r | nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b block does not meet the applicable statutory filing requirements, this date will not be listed as the |
| If the record specifies a delay (b) The 90th day after the r | ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed. |
| Dated 9-11-19 | 12AM |
| Haust | Signature of a member or authorized representative of a member |
| Garret Vernon | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00