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jmoore@moorelawvero.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **NEW KRW, LLC** Certificate of Status Certified Copy

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Corporate Filing Menu

Help

No. 1595 P. 2/4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| New KRW, L | | | |
|---|---|--|--------------------------------------|
| (Name of the Limited L (A.F. | dability Company as it now appears forida Limited Lability Company) | s on our records.) | |
| The Articles of Organization for this Limited Liabil | lity Company were filed on | May 11, 2016 | and assigned |
| Florida document number | | | |
| This amendment is submitted to amend the following | ng: | | |
| A. If amending name, enter the new name of the | e limited liability company he | <u>ге</u> ; | |
| C G Tea, LLC | | | |
| The new name must be distinguishable and contain the words | "Limited Liability Company," the de | esignation "LLC" or the abl | previation "L.L.C." |
| Enter new principal offices address, if applicable | e: | · | |
| (Principal office address MUST BE A STREET A | DDRESS) | | |
| | <u></u> | | Ac |
| , | | | CAR CAR |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO | X) | | 38 30 F |
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| | | | 100 10 0 1 |
| B. If amending the registered agent and/or registered agent and/or the new registered office | registered office address on address here: | our records, enter | the name of the new |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | - | - | |
| | Enter Flori | ida street address | |
| _ | | , Florida | |
| New Devisement & court's Standards If should be Devised | City | | Zip Code |
| New Registered Agent's Signature, if changing Regi | | | |
| I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regions of my has been notified in writing of this cha | nd complete performance of ed agent as provided for in C stered office address, I hereb | my duties, and I am fo hapter 605, F.S. Or, i | amiliar with and if this document is |

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

(((H16000124322 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 = Max $AMBR = Aa$ | anager athorized Member | | |
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| Effective date, if other than the date of filing: | (optio | | | |
| If an effective date is listed, the date must be specific and cannot be prior to date Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records. | of filing or more than 90 days after t | filing.) Pursuan | t to 60 be lis | 5,0207 ted as |
| ne record specifies a delayed effective date, but not an a The 90th day after the record is filed. | effective time, at 12:01 a | .m. on the | earl | ier of |
| Darec May 19+h 2016 | | | | |
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