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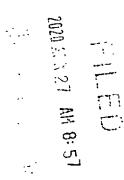
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COVER LETTER · · ·

TO: Registration Se Division of Cor		, , , , , , , , , , , , , , , , , , ,		
Bold Branc		<i>y</i>	•	
SUBJECT:		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter	_		
	Aaron Meisenheimer			
		Name of Person		
	Ink & Company LLC			
	 -	Firm/Company		
	PO Box 51266			
		Address	<u>·</u>	
	Jacksonville Beach, Florid	a 32240		
		City/State and Zip Code		
	accounting@voidlive.com	to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c		nearly)	
Aaron Meisenheimer	•	904 395-5628		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bold Brands 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 $\frac{06/09/2016}{1}$ Florida document number ______1.16000095672 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Ink & Company LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LUC" or the abbreviation "LUC." 602 Shetter Avenue Enter new principal offices address, if applicable: Jacksonville Beach, Florida 32250 (Principal office address MUST BE A STREET ADDRESS) PO Box 51266 Enter new mailing address, if applicable: Jacksonville Beach, Florida 32240 (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 City

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u> </u>	·	□Add
			□ Remove
		_ 	Change
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Note: If t	date, if other than the date of filing:	to 605.0207 (i be listed as th
document	,	
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the th day after the record is filed.	earlier of:
Dated Ap	ril 22	
	Signature of a member or authorized representative of a member	
	Aaron S. Misenheimer l Partner	
	Typed or printed name of signee	

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Filing Fee: \$25.00