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(Address)	—
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COVER LETTER

TO:				
SORI	EC.1:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Eugenio R. Cabrera		
			Name of Person	
Division of Corporations SUBJECT: DATEAFREAK.COM. LLC				
				
		825 Reflection Lane		
			Address	
		Weston, FL 33327		
			•	
		•		
		E-mail address: (to be used for future annual report not	dication)
For fu	rther information co	oncerning this matter, please ca	all:	
Gene	Cabrera		954 995-9466	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclo	sed is a check for th	ne following amount:		
■ S3	25.00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

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

DATEAFREAK.COM. LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) red Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 08/30/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited b	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
		18 SE
		JUN
Enter new mailing address, if applicable:		S 31.
(Mailing address MAY BE A POST OFFICE BOX)		
		7 0 :: 7 15
B. If amending the registered agent and/or registered registered agent and/or the new registered office address between the control of the co	l office address on our records, <u>e</u> ner <u>e</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	, Florid	
	City	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard Gonzalez	33471 Baldwin Road	■ Add
		Solon, Ohio 44139	☐ Remove
			Change
			☐ Remove
			☐ Change
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Effect	ive date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to		
1.011.	and the date most red in this block does not filled the applicable dankery films fecultaments, this date will not be	605,020 listed a	7 (3) s the
oocun	ent's effective date on the Department of State's records.		
the red	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	rlier n	f•
) The	90th day after the record is filed.	riici o	
Dated	TUDE 2013 2018		
	JUNE 20 13 2018		

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Typed or printed name of signee

Filing Fee: \$25.00