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(Re	questor's Name)	
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D. SCOTT JAN 3 1 2017

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: RCC	ng with C	hristine and ited Liability Company	Melinda, LCC.
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	melinda	Bloskin Name of Person	<u> </u>
		Firm/Company	
	6410 La	He Tern WO	4
•	Coconut	Creek City/State and Zip Code	33073
		o be used for futilire annual report notifi	cation)
For further information co	ncerning this matter, please ca	all:	
Melinda Branne of	Person	at $\frac{954}{\text{Area Code}}$ $\frac{53}{\text{Daytime}}$	- 330 2 Telephone Number
Enclosed is a check for the	following amount:		TALL SECOND
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Washing Control Copy (additional copy is enclosed)
Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations (6327 see, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- Boeing with Christine and Melinda, 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 10124 2014 and assigned Florida document number 11000 190484.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: Christine and Melinda are Hwesome, LLC The new name must be distinguishable and contain the words "Limited Liability 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)
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
City , Florida 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

If Changing Registered Agent, Signature of New Registered Agent

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 amending or remove 	ng Authorized Person(s) authorized to made in the desired to made in the desired	anage, enter the title, name, and address of each person being added
MGR = 1 AMBR = 1	Manager Au'thorized Member	
<u>Title</u>	<u>Name</u>	Address Type of Action
<u>M6R</u>	melinda Bloskin	6410 Lake Tern way - Add
		Coconut Creek, 9 33073 Remove
		Change
M <u>6 R</u>	Christine Cassano	5157 Sw 122 nd Terr DAdd
		Cooper City-91 33330 Remove
		Change
		
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f an effe Vote:	ve date, if other than the date of filing:	7 (3)(b s the
e rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.	of:
Dated _	1-17, 2017. A	FILED

Page 3 of 3

Filing Fee: \$25.00