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D. SCOTT DEC 1 2 2016

COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	SHUCKING	AWESOME LLC		
SUBJET.		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspon	dence concerning this matter t	o the following:	
		ERIC HERNANDEZ		
		- 	Name of Person	
		SHUCKING AWESOME I	LLC	
			Firm/Company	
		2601 NW 88TH TERRACI	E	
			Address	
		CORAL SPRINGS, FLOR	IDA 33065	
			City/State and Zip Code	
		DELONIX77@GMAIL.CO		ts f
		E-mail address: (to	o be used for future annual report notification)	ALCR CR P
For further in	iformation co	ncerning this matter, please ca	II:	
ERIC HERN	IANDEZ		954 829-4497 at ()	
	Name of	Person	Area Code Daytime Teleph	ORE AND SOLUTION ON PLANTS ON PARTY OF THE PROPERTY OF THE PRO
Enclosed is a	check for the	following amount:		₩
□ \$25.00 F	iling 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

SHUCKING AWESOME 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 Comp	pany were filed on 11/21/2016	and assigned
Florida document number L16000213534		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
SHUCKING TIME LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	S)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		
registered agent and/or the new registered office address	<u>, nere</u> :	7.5EC 6
Name of Navy Designand Accepts	,	題界工
Name of New Registered Agent:		1972 O FT
New Registered Office Address:	S. S. S.	100 P
	Enter Florida street address	200
	, Florida	
	City	Lip Gode CD

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> <u>Name</u> **Address Type of Action** _□ Add ☐ Remove ☐ Change □ Add _□ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change Remove— ☐ Remove

☐ Change

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Effective date, if other than the date fan effective date is listed, the date must be sp. Note: If the date inserted in this block de	of filing: secific and cannot be prior to date of filing or more to see not meet the applicable statutory filing re-	(optional) than 90 days after filing.) Pursuant to 605.02
locument's effective date on the Department		
	ective date, but not an effective time	e, at 12:01 a.m. on the earlier
The 90th day after the record is	s filed.	
Dated	2016	TAS 16
	·	DEC CRET LAH
		7.7
Eric Heman	the state of the s	<u>55 1 F</u>
Eric Vernam Signa	ture of member or authorized representative of a	a member

Page 3 of 3

Filing Fee: \$25.00