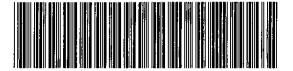
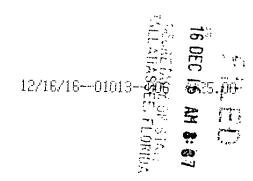


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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only







Advanced Incorporating Service, Inc.

1317 California Street P.O. Box 20396 Tallahassee, FL 32316

Phone: 850-222-CORP Fax: 850-575-2724 Email: orders@aisincfl.com Website: www.aisincfl.com

Huge Bear Management, LC
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PICK ONE:
CERTIFIED COPYC.U.S.
FILING:
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
FICTITIOUS NAMESERVICEMARK/TRADEMARKAMENDMENT
FOREIGN QUALIFICATIONJUDGMENT LIEN
OTHER
RETRIEVAL:
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY
Of
APOSTILLE/CERTIFICATION REQUEST:
Country
Amount of Documents
DATE 12/16/16 TIME
Notes:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Huge Bear Management, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000226687</u>	were filed on 12/14/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	200 2nd Avenue South, Unit 417	
(Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL 33701	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	200 2nd Avenue South, Unit 417 St. Petersburg, FL 33701	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		he name of the new
		OH C
New Registered Office Address:	Enter Florida street address , Florida	6 An
	City	Zig Code on
New Registered Agent's Signature, if changing Registered Agent:		89
I hereby accept the appointment as registered agent and agree	ee to act in this capacity. I further agre	e to comply with the

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

or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Name <u>Address</u> **Type of Action** □ Add ☐ Remove ☐ Change □ Add _□ Remove _□ Change ☐ Remove _□ Change □ Add _□ Remove _□ Change _□ Add □ Remove _□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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frective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the De	t be specific and cannot be prior to date of filing or mock does not meet the applicable statutory filing	(optional) more than 90 days after filing.) Pursuant to 605.02 ng requirements, this date will not be listed a
e record specifies a delayed The 90th day after the reco	l effective date, but not an effective ord is filed.	time, at 12:01 a.m. on the earlier
ated December 15	. 2016	
1	Signature of a member or authorized representative	e of a member
1	•	
Michael Hambleton, Ma	nager	

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Filing Fee: \$25.00