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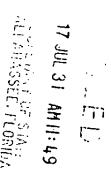
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: YE	The Brand LI	LC ited Liability Company	·
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Tiro L. Ra	mathibela Name of Person	
	YE The	Brand, LL C Firm/Company	
	12550 Bisc	ayne Rlud, Ste	208
		City/State and Zip Code	
	yethebrane E-mail address: (1	do gmail. 10m	leation)
 For further information co 	oncerning this matter, please ca		
livo Ram	athibela Person	at (<u>404</u>) <u>579-0</u> Area Code Daytime	O 2 7 Telephone Number
Enclosed is a check for th	e following amount:		
♥ \$25.00 Filing 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

VE The Brand LLC. (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our reco lability Company)	r(ds.)		
The Articles of Organization for this Limited Liability Company [Florida document number <u>L 17 0000 68712</u> .	were filed on $3\sqrt{21/1}$	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:			
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "Li	J.C" or the abbreviation "L.L.C."		
l Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable: 		17 JU		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ds, enter the name of the new		
Name of New Registered Agent:		A. (1)		
New Registered Office Address:	Enter Florida street addi	TNS		
	name, enter the new name of the limited liability company here: the distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbreviat	Torida 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 m	anage, enter the title, name, and address	of each person—being added
MGR = M	from our records: anager uthorized Member		
 <u>Title</u>	<u>Name</u>	Address	Type of Action
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		26 melody Dr. Pooler, C-A 31322	□ Remove
			Change
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n effective date is listed, the date must be specific and cannot be stee. If the date inserted in this block does not meet the cument's effective date on the Department of State's re-	applicable statut		days after filin	g.) Pursua		
record specifies a delayed effective date, be The 90th day after the record is filed.	ut not an effe	ctive time, at	12:01 a.m.	on th	e earl	ier (
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Filing Fee: \$25.00