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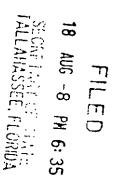
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Law Offices of Leon R. Margules, P.A.



Leon R. Margules, Esquire. Zachary D. Margules, Esquire.

August 3, 2018

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: 2 GIRLZ VENTURES, LLC.

To whom it may concern,

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Zachary D. Margules, Esquire Law Offices of Leon R. Margules, P.A. 633 South Andrews Avenue, Suite 500 Fort Lauderdale, FL 33301

For further information concerning this matter, please call:

Zachary D. Margules, Esquire at (954) 587-0482

Enclosed please find a check made payable to the Florida Department of State for:

\$30.00 Filing Fee & Certificate of Status

Sincerely,

Zuchary D. Margules, Esq.

18 AUG -8 PH 6: 39

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Florida document number 61700044 This amendment is submitted to amend the fo	Liability Company (367 Howing:		FILED 18 AUG -8 SM 6:35 SECONTACT CE STATE FALLAHASSEE, FLORIDA
A. If amending name, enter the new name	or the minied han	inty company nere.	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	5701 Suuset j	Drive, Suite 216
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	South Miany	33143
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of	I/or registered of		
Name of New Registered Agent:	Sher	i K Goldstein	
New Registered Office Address:	6874	^	RUU
	Lake L	Ugith Florida ;	33463
		City	Zin 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, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title Name 1 Type of Action 7430 SW 141st Terrace Miamin FL 33158 Karia Schroeder □ Remove ☐ Change Jama L Carbone 7240 Windy Preserve DAdd Lake Wolth, FL 33467 ___ 🗆 Add ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

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