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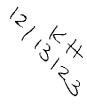
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COVER LETTER

Division of Cor			
DAY I HUS	STLERZ ENTERTAINMENT I	LLC	
SUBJECT:			
DAY 1 HUSTLERZ ENTERTAINMENT LLC Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Paul Georges		
			
	DAY I HUSTLERZ ENTE	RTAINMENT LLC	
		Firm/Company	 ·
	433 Plaza Real, Suite 275		
		Address	
	Boca Raton, FL 33432		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	ation) 0 E
For further information of	oncerning this matter, please ca	all:	
Paul Georges	5		, V
		at ()	
Name o	f Person	Area Code Daytime 1	elephone Number
Enclosed is a check for the	he following amount:		THE O
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address Registration		Street Address: Registration Secti	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAY THUSTLERZ ENTERTAINMENT LLC

(<u>Name of the Limited Liability Com</u> (À Florida Limite	pany as it now appears on our rec ed Liability Company)	rords.)
The Articles of Organization for this Limited Liability Compartion document number Lt7000141467	ny were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	-	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		202 Si
2.76		5 T
If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>ent</u>	ter the name of the new regis
		73
Name of New Registered Agent:		
		MIO OO
Name of New Registered Agent: New Registered Office Address:	Enter Florida street ada	OO PATE
		OO OO

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 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
MGR	KERVENS GEORGES	433 Plaza Real	-
		Suite 275	
			□Remove
		Boca Raton, FL 33432	
			■Change
AMBR	Paul Georges	433 Plaza Real	
		Suite 275	
			🗆 Remove
		Boca Raton, FL 33432	
			= Change
MGR	DONE C GEORGES	433 Plaza Real	
			
		Suite 275	
			Remove
		Boca Raton, FL 33432	
			■ Change
			S BAdd T
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effective (frame)	ve date, if other than the	date of filing:		(opt	ional)	3 • q
voic:	retive date is listed, the date must If the date inserted in this blo	ck does not meet the app	plicable statutory til-	more than 90 days afte ing requirements, th	r filing.) Pursuam tio (is date will not 表 [505.020 <u>7 (</u> . isted a <u>s</u> ,tl
ioc umc	ent's effective date on the De	partment of State's reco	rds.		J	
record d is file	d specifies a delayed effective ed.	date, but not an effective	re time, at 12:01 a.m	on the earlier of: (I	b) The 90th day a	fter the
N 	NOVEMBER 20TH	202.1				
_	W. 4/1 3/7	Regarse				
		Signature of a member or a	uthorized representativ	ve of a member		