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| Special Instructions to | Filing Officer: | |
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COVER LETTER

| FO: | Registration Se Division of Cor | | *. | |
|----------------|------------------------------------|---|---|---|
| SUBJE | Red Sangrit | ı, LLC | | |
| 3000 | | Name of Lim | ited Liability Company | |
| The enc | closed Articles of . | Amendment and fee(s) are sub | mitted for filing. | |
| Please r | eturn all correspo | ndence concerning this matter | to the following: | |
| | | Debbie Wilmot | | |
| | | - | Name of Person | |
| | | Debbie's Accounting Servi | ce, Inc. | |
| | | | Firm/Company | |
| | | 3575 Southside Blvd | | |
| | | | Address | |
| | | Jacksonville, FL 32216 | | |
| | | | City/State and Zip Code | ** *********************************** |
| | | tomcrego@aol.com | | · |
| | | E-mail address: (| to be used for future annual report notifi | cation) |
| For furt | her information co | oncerning this matter, please ea | ıli: | |
| Debbie | Wilmot | | 904 733-4547 | |
| | Name of | Person | at () Area Code Daytime | Telephone Number |
| Enclose | d is a check for th | e following amount: | | |
| ⊋ \$2 5 | .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

Red Sangria, 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 Company were filed on 07-14-2017 Florida document number 1.17000151454 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 |
|-------------------------|---------------------|---|----------------|
| Mgr | Jigar P. Patel | 4102 Crownwood Drive Jax., FL 32-Z. 16 | ■ Add |
| | | | 🗆 Remove |
| | | | Change |
| Mgr Falguniben R. Patel | Falguniben R. Patel | 730 Indigo Run Drive Jacksonville. FL 322 | 218 🗆 Add |
| | | | Remove |
| | | | Change |
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| | | | □ Remove |
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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| Remove Only Falguriben Patel |
| Only add Jigan P Pate/ |
| Donat remove Rajen Maru |
| Do not remove Ruchin Part |
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| E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. |
| Dated 12/15/2017 |
| Rujery: |
| Signature of member or authorized representative of a member |
| Rajen II Maru |
| Typed or printed name of signce |

Page 3 of 3

Filing Fee: \$25.00