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COVER LETTER

TO:		istration Secti sion of Corpo					
SUBJEC	т.	Marketplace i	Hemp LLC				
SODJEX			Name of Limi	ted Liability Company			
			mendment and fee(s) are sub-				
ricasciic	z(u) ii	an correspond	Ayssa DiPietro	ar the following.			
				Name of Person		 	
			Marketplace Hemp LLC				
				Firm/Company		····	
			1890 Brickell Ave Unit D				
				Address			
			Miami, FL 33129			-	
			ayssa.dipietro@gmail.com	City/State and Zip Code			ES I TELED
			E-mail address: (to be used for future annual r	report notification))	五百万
For furth	her ir	iformation cor	ncerning this matter, please ea	afl:			点
Ayssa D	DiPie	tro		617 378 at ()	38614		ু টুল ক
		Name of I	Person	Area Code	Daytime Teleph	hone Number	
Enclose	d is a	check for the	following amount:				
□ \$ 25	.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enci		□ \$60.00 Filing Certificate of Certified Cop tadditional copy	Status &

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marketplace Hemp LLC	Company of it now appears on our race	rde \
(A Florida)	Company as it now appears on our reco limited Liability Company)	<u>। पर्ः ।</u>
The Articles of Organization for this Limited Liability Co	mpany were filed on 07/29/2017	and assigned
Florida document number 1.17000161823	<u>.</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
AMD Paradigms LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register		rds, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register		
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register		rds, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address.	ess here:	TO THE PERSON OF
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address to the new registered office address to the new registered office address to the new registered of the new registered o		TO THE PERSON OF
registered agent and/or the new registered office addr	ess here: Enter Florida street add	TO THE PERSON OF

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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
AR	Alan DiPietro	82 G St Unit 3	DAdd
		Boston, MA 02127	■ Remove
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n effective date is listed, the date must ote: If the date inserted in this blo	be specific and cannot be prior to ck does not meet the applicab	date of filing or more than 9 le statutory filing require	0 days after filing.) Pursuant to 605: ments, this date will not be liste
cument's effective date on the De	partment of State's records.	, , ,	
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record specifies a delayed The 90th day after the reco	effective date, but not a indis filed.	an effective time, at	: 12:01 a.m. on the earlie
August 9	2017		
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