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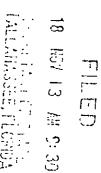
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COVER LETTER

rO: Registration S Division of Co	rporations	•			
Fun World SUBJECT:			<u> </u>		
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Simon Baez				
		Name of Person			
	Fun World LLC.				
		Firm/Company			
	13712 SW 118th Ter		ני נ ז		1 • 1
		Address		15 To	FILED
	Miami, FL 33186			图2. 草	
	funworldoftoys@gmail.com	City/State and Zip Code		13 M S: 30	
	E-mail address: (to be used for future annual report notifi	ication)		
For further information of	concerning this matter, please c	all:			
Simon/Daniel Baez		305 927-9450 at ()			
Name o	of Person		Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

TO:

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**

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L17000174158	y were filed on 8/15/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	
Enter new principal offices address, if applicable:	13712 SW 118TH TER MIAMI, FL 33186
(Principal office address MUST BE A STREET ADDRESS)	2 7
Enter new mailing address, if applicable:	13712 SW 118TH TER MIAMI, FL 33186
(Mailing address MAY BE A POST OFFICE BOX)	€; 3
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:	office address on our records, enter the name of the
New Registered Office Address:	
1.5 Hogistored Office Hadress.	Enter Florida street address
	, Florida
	City Zip Code

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
			□ Add
			□ Remove
			Change
			□ Remove
			Change
			D-Add F
			Change Change Change Change Change Change
			Add
			Remove
			☐ Change
			□ Remove
			□ Change
			
			Remove
			Change

Daniel Baez - 5% ownership	
Ana M. Del Rio - 45% ownership	
Christian Alfonso - 45% ownership	
All ownership is contigent on performance metrics/agree	ement
which can be found in the companies records.	
<u></u>	
effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prio If the date inserted in this block does not meet the appli- ment's effective date on the Department of State's records	cable statutory filing requirements, this date will not be l
ecord specifies a delayed effective date, but no e 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the ea
November 6th 2018	·
	→ < SU

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00