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DIVISIÓN GE LORPORATIONS TALLAHASSEE, FLORIDA

1.01 (...)

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LOW Key entertaiment ! ! C Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Garvey Francois Name of Person
Low Key enlectainment !!
431 Hunter St Address
City/State and Zip Code Firm X ceative Common Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (56) 275-8713 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☑ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Low Key Entertains	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 17000242565.	were filed on $8 - 11 - 21$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabile Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	ility Company," the designation "LLC" or the abbreviation "L.L.C." West Palm Beach F1,33405
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	431 Huter St West Palm Beach F1,33405
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
· · · · · · · · · · · · · · · · · · ·	, Florida
	City Zip 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 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
AMBR	Garvey Francois	431 Hunter St WPBFT	33405 12Add
		5120 White Olember W.P.BF1 334	15 ZRemove
			□Change
AMBR Max Francois	Max Francois	431 Hunter St. W.P.G.F. 1 3340	
		S120 While Oleander WPB, F	Remove
			□Change
		 	□Add
			□Remove
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m effecti ote: If	date, if other than the date of filing:
ecord s is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	8-11-21
	Hans
	Sonature of a mumber of other just a second as
	Signature of a member or authorized representative of a member Company Typed or printed name of signee