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| (Requestor's Name) |
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| (Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: |
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| TO: Registration Secti Division of Corpo | | | |
|---|--|---|--|
| SUBJECT: <u>RTB (</u> | lenture Proje Name of Lim | tcts LLC ited Liability Company | |
| The enclosed Articles of Ar | nendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspond | ence concerning this matter | to the following: | |
| | Ryan Bo | DZ E M Q N Name of Person | |
| | | Firm/Company | |
| | | Address | |
| - | Starving Arti | City/State and Zip Code St Food Truck (cooperate of the cooperation) | gmail.com |
| For further information conc | erning this matter, please ca | n: | |
| Ryan Bo- | ZEMAN | at (321) 436 Area Code Daytim | - 4555 |
| Enclosed is a check for the fo | ollowing amount: | | |
| \$25.00 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

| RTB Venture Pro | jects LLC | ! |
|---|--|------------|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Lia | y as it now appears on our records.) iability Company) | ' |
| The Articles of Organization for this Limited Liability Company we Florida document number <u>L18 00 000 4438</u> . | were filed on 01/05/2018 and assigned | } |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability | lity company here: | |
| The new name must be distinguishable and contain the words "Limited Liability | ty Company," the designation "LLC" or the abbreviation "L.L.C." | |
| 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 here: | ice address on our records, enter the name of th | c new |
| Name of New Registered Agent: | The Residence of the Party of t | -, |
| New Registered Office Address: | 9 14 C | 1 |
| | Enter Florida street address | 1 |
| | , Florida | _ |
| New Registered Agent's Signature, if changing Registered Agent: | City Zip Code | ! |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office ac | erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, if this document | <i>t</i> 1 |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

| If amending or removed | Authorized Person(s) authorized to m from our records: | anage, enter the title, name, and address of each | person being a | dded |
|------------------------|--|---|----------------|----------|
| MGR = M | | | | |
| <u>Title</u> | <u>Name</u> | Address | Type of Action | <u> </u> |
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| fan ei Note: | tive date, if other than the date of filing: 0 / 2018 (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date we ment's effective date on the Department of State's records. | | |
| | ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of e 90th day after the record is filed. | n the e | arlier of |
| Dated | 01/12/2018. | | |
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Page 3 of 3

Filing Fee: \$25.00