LIBOUCIOIT

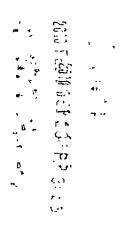
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Certified Copies	_ Certificates	of Status
Special Instructions to	——————————————————————————————————————	

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J. HARRIS

COVER LETTER

	istration Sectision of Corp			
SUDIFCT.	The Party Pe	ddler L.L.C.		
SUBJECT.		Name of Limi	ted Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return	all correspond	dence concerning this matter t	to the following:	
		LaNier Echols		
			Name of Person	
			Firm/Company	
		8849 Old Kings Rd. S 172	1 min company	
			Address	
		Jacksonville, Florida 32257	7	
		lanier.echols@gmail.com	City/State and Zip Code	
		E-mail address: (to	o be used for future annual report notific	ation)
For further in	formation cor	ncerning this matter, please ca	11:	
LaNier Echo			850 322-8538	
	Name of I	Person	Area Code Daytime T	Felephone Number
Enclosed 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 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

The Party Peddler L.L.C.		
(Name of the Limited Liab (A Flor	pility Company as it now appears on ou ida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability	Company were filed on January 1	1. 2018 and assigned
Florida document number L18000010117		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The Party Pedaler L.L.C.	· · · · · · · · · · · · · · · · · · ·	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designati-	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	ORESS)	* 4 65
Inter new mailing address, if applicable:		•.·*
Mailing address MAY BE A POST OFFICE BOX)		
		
		7
3. If amending the registered agent and/or reg	istered office address on our r	ecords, enter the name of the
egistered agent and/or the new registered office ad	dress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t 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 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
			☐ Remove
			Change
			Add
			Romove
			Change .
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	Eft.	February 8, 2	018	(optional)	
ctive date, if other than effective date is listed, the date		g:	data of Elina or more	than Of days after filing) Pursuant to 605
effective date is listed, the date <u>e:</u> If the date inserted in the ument's effective date on t	us block does not t	meet the applicat	le statutory filing re	quirements, this date	WILL HOL DE LIST
Intelle 2 effective date on t	ne Departmon or				
record specifies a dela	aved effective (date, but not	an effective tim	e, at 12:01 a.m.	on the earli
he 90th day after the	record is filed.	•			
		2018			
February 8		2010			

Page 3 of 3

Typed or printed name of signee

LaNier Echols

Filing Fee: \$25.00