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| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Special Instructions to | Filing Officer: | |
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| TO: | Regi: Divis | stration Section of Corp | tion orations | | | | | |
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| SUBJEC | T: | DESIGNER | GRAPHICS OF FLORIDA | | | | | |
| | _ | | Name of Lin | nited Liability Company | | | | |
| The enclo | sed A | Articles of A | mendment and fee(s) are sub | omitted for filing. | | | | |
| Please ret | um a | II correspond | dence concerning this matter | to the following: | | | | |
| | | | JUSTIN NEWMAN | | | | | |
| | | | Name of Person DESIGNER GRAPHICS OF FLORIDA, LLC. | | | | | |
| | | | 1059 SW 30th AVE | Firm/Company | <u> </u> | | | |
| | | | DEERFIELD BEACH, FL | Address . 33441 | | | | |
| | | | hello@designergraphicsfl.co | City/State and Zip Code | | | | |
| For further | r info | rmation cone | E-mail address: (cerning this matter, please co | to be used for future annual re | eport notificatio | n) | | |
| JUSTIN N | | | certaing this minter, prease co | | -8436 | | | |
| | | Name of Pe | erson | Area Code | Daytime Telep | phone Number | | |
| Enclosed is | s a ch | neck for the f | ollowing amount: | | | | | |
| ■ \$25.00 | Filir | ig Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo | | ☐ \$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

DESIGNER GRAPHICS OF FLORIDA, LLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 1/23/2018 and assigned Florida document number 1.18000020972 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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> MGR | <u>Name</u> JUSTIN NEWMAN | Address | Type of Action |
|---------------------|------------------------------|---------|----------------|
| | | | |
| | | | Remove |
| CEO | CHRISTIAN COLON | | Change |
| CFO | | | Add |
| | | | Remove |
| QU.S. | JUSTIN SIBELIUS | | Change |
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| Effective data if other than t | ho data of Clima | | | |
| Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the | block does not meet the a | ppiicable statutory II | r more than 90 days after filing ling requirements, this date |) g.) Pursuant to 605.0207 (3)(will not be listed as the |
| the record specifies a delay The 90th day after the re | red effective date, bu ecord is filed. | t not an effectiv | e time, at 12:01 a.m. | on the earlier of: |
| Dated | 2019 | | | |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00