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To:	Division of Corporations Fax Number : (850)617-6383
From	: Account Name : GREENBERG TRAURIG (WEST PALM BEACH) Account Number : 075201001473 Fnore : (061)955-7600 Fax Number : (561)338-7099
L Annual cop L 226 CEmail Addr L 200 L 20	
	MND/RESTATE/CORRECT OR M/MG RESIGN S CKY JOHNSON'S GUN PAWN & GOLD LLC S CKY JOHNSON'S GUN PAWN & GOLD LLC S CKY JOHNSON'S GUN PAWN & GOLD LLC S C

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JUN.14.2018 10:50

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROCKY JOHNSON'S GUN PAWN & GOLD LLC	
(Name of the Limited Lizbillity Company as (A Florida Limited Lizbilli	it now appears on our records.)
(A Florida Limitec Liabiii	y Company)

The Articles of Organization for this Limited Liability Company were filed on <u>02/01/2018</u> and assigned Florida document number 1.18000028626

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Vice Pawn Gold & Guns LLC

The new name nust be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	" or the abbrev	iation "L	L.C."
		<u>}</u>	281	
Enter new principal offices address, if applicable:			دينا م	_
(Principul office address MUST BE A STREET ADDRESS)		<u>بتر</u> همر است ی <mark>ر:</mark> ≪	NUC	
		57.7 57.7		1
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Enter new mailing address, if applicable:		 	ā_	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)				<u></u> -

R. 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:	Enter Florida street address
	City City

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 llability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Ageni

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person heing added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	<u>June 14</u>
	MI Child Steinmire of michoer or authorized representative of a member
	Michael Rideman
	Typed or plinted name of signee

Page 3 of 3

Filing Fee: \$25.00