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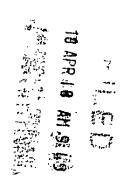
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COVER LETTER

TO: Registration S Division of C				
SUBJECT: Edm	nundsson LL	C		
	N	Name of Limited Liabil	ity Company	
Dear Sir or Madam:				
The enclosed Statemer	at of Correction and fee(s) a	re submitted for filing.		
Please return all corres	pondence concerning this n	natter to the following:		
Guy A. Re	iss			
	Name of Person			
Reiss+Pre	uss LLP			
	Firm/Company	77 17 44 6		
200 West 41st Street, 20th Fl.				
	Address			
New York,	NY 10036			
	City/State and Zip Code	, , , , , , , , , , , , , , , , , , , ,		
greiss@reisspreuss.com				
E-mail address: (to be used for future annual	report notification)		
	concerning this matter, ple	ease call:		
Guy A. Re	iss	at (<u></u>	731-2770	
Name	of Person	Area Code	Daytime Telephone Number	
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle	F C P	MAILING ADDRESS: Registration Section Division of Corporations 2.O. Box 6327 Callahassee, Florida 32314	
Enclosed is a check for	r the following amount:			
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (9/15)				

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: Edmundsson LLC The Florida Document number of the limited liability company is: L18000073807**SECOND:** Document to be corrected is: Articles of Organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT x Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The Authorized Person(s) Detail should say: Mattias Protzmann, Mellingburgredder 27, 22395 Hamburg, Germany instead of: Mattias Protzmann c/o MP Ventures UG <u>OR</u> П Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are OR The electronic transmission of the record was defective. April 5, 2018 Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature Filing Fee: S25.00

Certified Copy:

\$30.00 (optional)