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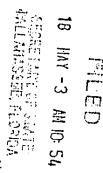
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COVER LETTER

TO: Registration S Division of Co			
BIG NOR	WEGIAN SUN LLC		
SUBJECT:	Name of Lim	lited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JOHN MICHAEL HANS	EN	
		Name of Person	
	BIG NORWEGIAN LLC		
		Firm/Company	
	460 HARPER ROAD P	O BOX 53	
		Address	****
	PIERSON, FL 32180		
	,	City/State and Zip Code	
	ACCT123@CFL.RR.COM		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
PAMELA HESTER CH	IILTON	386 943-4070	
Name	of Person		e Telephone Number
Enclosed is a check for	the following 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

BIG NORWEGIAN SUN LLC			
(Name of the Lim	ited Liability Comps (A Florida Limited	any as it now appears on ou Liability Company)	ir records.)
The Articles of Organization for this I imited I Florida document number L18000074503	ishilin/Componi	13/22/20	18
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
BIG NORWEGIAN, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	JOHN MICHAEL HA	NSEN
(Principal office address MUST BE A STRE	ET ADDRESS)	460 HARPER ROAD	
		PIERSON, FL 32180	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		JOHN MICHAEL HA	
		460 HARPER ROAD	野食 6
		PIERSON, FL 32180	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the name of the inev
Name of New Registered Agent:	JOHN MIICH	AEL HANSEN	OREGINA SE
New Registered Office Address:	460 HARPER	ROAD	A STATE OF THE STA
*		Enter Florida stre	et address
	PIERSON		, Florida 32180
		City	Zıp 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
MGR	JOHN MICHAEL HANSEN	460 HARPER ROAD	B Add
		PIERSON, FL 32180	Remove
			☐ Change
MGR MIKE HANSEN	MIKE HANSEN	460 HARPER ROAD	Add
		PIERSON, FL 32180	■ Remove
			Change
			D Add
			Remove All Changer
			Remove
			Change
			D Add
			Remove
			Change
			☐ Remove
			□ Change

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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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<u> </u>	
Effective date, if other than the date of filing: X 1-28-18 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.)7 (3)(b) is the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.	of:
Dated X April 28, 2018.	
X Signature of a member or authorized representative of a member	
JOHN MICHAEL HANSEN Typed or printed name of signee	

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Filing Fee: \$25.00