P.001

Page 1 of 2



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Division of Corporations

Fax Number : (550) 617-6383

From:

Account Name : BILZIN SUMBERG BAENA FRICE & AXELROD LLP

Account Number : 075350000132 : (305)374-7580 Phone

: (305)351-2122 Fax Number

\*\*Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please ...

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## SHYRT LLC

Certificate of Status	1
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Help

(B)

H18000151993 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHYRT LLC	
(Name of the Limited Liability Company as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Company were filed on 4/9/18  Florida document number L13000086538	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	7. 69 60 1
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "I	LC' 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)	0 He 0 He
B. If amending the registered agent and/or registered office address on our recoregistered agent and/or the new registered office address here:	ords, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street co	doress
	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

Page 1 of 3

H180C0151993 3

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

MGR = Manager AMBR = Authorized Member

<u> Fitle</u>	Name	Address	Type of Action
President	Spencer Kramer	82 NE 29th Street	■ Add
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D. If amending any other information, enter change(s) here: (Anach additional sheets, if necessary.)

Page 3 of 3 Filing Ree: \$25.00