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N COOPER APR 27 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Estime Holdings LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ridy Estime Name of Person
Rame of Person Estime Huldings LLC Firm Company
11660 WW 56th 82 # 1/2
Coral Springs IL 33076 City'State and Zip Code
estimeholdings LC@gnail.com E-mail address: (10 be used for future sential report portification)
For further information concerning this matter, please call:
Rudy Estime at 754, 265-3966 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status S55.00 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

Estime Holdings				
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)			
The Articles of Organization for this Limited Liability Company v Florida document number <u>L18000095214</u>	were filed on April 16, 2018	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and contain the words "Limited Liability	y Company." the designation "LLC" or the al	Porroviezion "L.L.C."		
Enter new principal offices address, if applicable:		98 YLL X.		
(Principal office address MUST BE A STREET ADDRESS)		APR E		
The second of th		26		
		P		
Enter new mailing address, if applicable:		နှင့် မ		
(Mailing address MAY BE A POST OFFICE BOX)		5 3		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.	Enter Florida street address	· · · ·		
	Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a	erformance of my duties, and I am j ovided for in Chapter 605, F.S. Or,	familiar with and if this document is		

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	<u>Address</u>	Type of Action
MGR	Tenaj Gordon	11660 NW 56 AP # 112 Coral Springs IL 33076	D Add
	-	Coral Spengs IL 33076	E Remove
			Change
MER	Kaylin Block Estime	1 Painted Tueste LN	
		Sickerville NJ 08081	□ Remove
			O Change
MER_	Rudy Estime	11660 NW 564 DR 4/12	
		Copal Springs FL 33076	≥ □ Remove
			_ Change
			□ Add
			_ C Remove
			_ Change
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			_□ Remove
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