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COVER LETTER

TO:				
SUB	IECT: Dich	Ink LLC Name of Limite	ed Liability Company	
The	enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Pleas	se return all correspond	dence concerning this matter to	o the following:	
		Dustin J. B	Name of Person	
		Durty Ink, 1	Firm/Company	
			Address	
		Registration Section Division of Corporations CT: Dirty Ink, LLC Name of Limited Liability Company Closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: District Ink, LLC Firm/Company 2353 Street wheel Court Address Flem: reg Island FL 32003 City/Stale and Zip Code District Ames 95.1 Ginatil Com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: District Information concerning this matter, please call: Company Area Code Daytime Telephone Number Seed is a check for the following amount: (5.00 Filing Fee Certificate of Status		
For	further information co	ncerning this matter, please ca	III:	
	Dastro T Name of	Person	at (<u>904</u>) <u>708-67</u> Area Code Daytime	Telephone Number
Enc	losed is a check for the	e following amount:		
Ş	\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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 Tallahassec, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION ED

MIR NOV -5 PM 3: 17

	2018 NOT THE STATE
Dry Ink L. L. C.	inhility Company as it now appears on our records.)
(A)	Florida Limited Liability Company) (ALL-
Florida document number <u>L 1800014157</u>	<u>a</u>
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	e limited liability company here:
BOC The Well Toller	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable	le:
•	
The Articles of Organization for this Limited Liability Company were filed on	
The state of anniholds	
•	24.
(Mailing address MAY BE A POST OFFICE BC	<u></u>
D. If amonding 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	e address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Flanida
	City Zip Code
New Registered Agent's Signature, if changing Reg	gistered 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 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 603.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b) The 90th day after the record is filed. Dated November 2. 2018			
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Signature of a member or authorized representative of a member	<u>_</u>	Pusta Record Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00