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то:	Division of Corporations Fax Number : (850)617-638		BIU A
From:	Account Name : DELOACH,PL Account Number : I20030000125 Phone : (407)480-500 Fax Number : (407)480-502		51415. 51415.
Entei a	**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.		
E	mail Address:		_
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EULIANO:HOLDINGS, LLC (Name of the Limited Liability (A Florida	Y Company as it now appears on our records.) Limited Liability Company)	<u>_</u>
The Articles of Organization for this Limited Liability Co Florida document number <u>L18000205192</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
Skinny Pirate Holdings, LLC		
The new name must be distinguishable and contain the words "Limi		
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	<u>(ESS)</u>	<u>11. P. D</u>
		6.25
Enter new malling address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or registered agent and/or the new registered office add	tered office address on our records, ent ress here:	er the name of the
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florido street address	
	, Fiorida	
	<u> </u>	Zip Code

New Rogistered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment us 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

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DELOACH PL

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) H19000053095 3

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _	2/12/2019	
	Signature of	a member or authorized representative of a member
	John D. Euliano	
		Typed or printed name of signer

.

Filing Fee: \$25.00