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1/20/22 SECRETARY OF THE

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	AR FRAGRANCE COMPANY,	LLC					
SUBJECT:	Name of I	imited Liability Company					
The enclosed Artici	es of Amendment and fee(s) are s	submitted for filing.					
Please return all cor	respondence concerning this mat	ter to the following:					
	DARYL COHEN						
		Name of Person					
	GUITAR FRAGRANC	E COMPANY OF FLORIDA, LLC					
		Firm/Company					
	C/O DARYL COHEN	C/O DARYL COHEN 32 NE 1ST AVE					
		Address HALLANDALE, FL 33009					
	HALLANDALE, FL 33						
	guitar FRA E-mail addres	City/State and Zip Code 19 ANCE COMPANY (YA s: to be used for future annual report notifi	hoo, com line of the control of the				
For further informa	tion concerning this matter, pleas	e call:					
EMANUEL ELFE	NBEIN	305 667-5756 at ()					
N	ame of Person	Area Code Daytime	Telephone Number				
Enclosed is a check	for the following amount:						
☐ \$25.00 Filing F	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)				
<u>Mailing A</u> Registrat	ddress: tion Section	Street Address: Registration Sec	ction				
•	of Corporations	Division of Corp	porations				
P.O. Box	: 6327	The Centre of Ta	allahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GUITAR FRAGRANCE COMPA		nu ac it nav appeare	on our records.)		
(Name of the Limi	(A Florida Limited	iny as it now appears o Liability Company)	The state of the s		
The Articles of Organization for this Limited I Florida document number L19000036795	Liability Company	were filed on FEBI	RUARY 05, 2019 and assigned		
This amendment is submitted to amend the fol	llowing:				
A. If amending name, enter the new name	of the limited liab	ility company here	;		
GUITAR FRAGRANCE COMPANY OF FLOR	IDA, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	icable:	C/0 DARYL COHEN			
(Principal office address MUST BE A STRE		32 NE IST AVE			
THICHE OFFICE GUARESS WOST BE A STREET ADDRESS		HALLANDALE BEACH, FL 33009			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		C/O DARYL COI	HEN		
		HALLANDALE BEACH, FL 33009			
B. If amending the registered agent and/or agent and/or the new registered office addro			ords, enter the name of the new registere		
New Registered Office Address:	32 NE IST AV	Æ			
	<u> </u>		i street address		
	HALLANDAI	E BEACH	, Florida <u>33009</u>		
			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

DANYL COhON V.P.

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
President	Roger Pinckney	5191 SANAZEN DAIUS	🗆 Add
		Hollywood, FL 3302	□Remove
			□Change
VICE RESIDONT	DANYL Cohen	32 NE 157 AVE	□Add
		HallAndalo BEALH, FL 33009	🗆 Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□ Remove
			🗆 Change
			□Add
			□ Remove
			□Change

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	ate, if other than	the date of	Glina				(optional)	
effective e: If the	date is listed, the date date inserted in the effective date on the	must be specif is block does	ic and cannot not meet th	e applicable	tte of filing or m statutory filin	ore than 90 da g requiremen	ys after filing) Pursuant to 605.02 will not be listed
ord spe filed.	rifies a delayed effo	ective date, bu	it not an eff	ective time,	at 12;01 a.m. (on the earlie	rof:(b) Th	ie 90th day after ti
d	12-28	· 202	<u>L</u>					
_	A.	Signature	Tel.	<u> </u>	d roprocentative	of a member		