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COVER LETTER

то:	Registration Sec Division of Corp		;	
	Ink-It, LI	.c		,
SOBJE	CT:	Name of Lim	ited Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		Deborah A. Gibson, CP		
			Name of Person	
		Doug Burns, PA		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		2559 Nursery Road, Suite	A	
			Address	·····
		Clearwater, Florida 33764		
		dburnspa@tampabay.rr.con	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For furt	her information co	oncerning this matter, please ca	all:	
Deboral	h Gibson, CP		727 725-2553	
· · · · ·	Name of	Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for the	e following amount:		
■ \$25	.00 Filing 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)
Enclose	Name of	e following amount:	at () Area Code Daytim □ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee. Certificate of Sta Certified Copy

MAILING ADDRESS:

TO:

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

ARTICLES OF ORGANIZATION OF

Ink-It, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2019 HAY 20 P 2: 43 The Articles of Organization for this Limited Liability Company were filed on February 13, 2019 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Angel NC, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Anita Price	5905 Bayou Grande Boulevard NE St. Petersburg, Florida 33703	
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Effective date, if other than the date of filing: [In 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 605.0207 Age; [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. [In effective date and the date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date must be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date must be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date must be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date must be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the date of filing or more than 90 days after filing.) Pursuant to 605.0207 Age; [If the possible of the poss		
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