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April 25, 2019

CRAIG FENN SHRINK WRAP INDUSTIRES 12854 CARRINGTON CIRCLE #203 NAPLES, FL 34105

SUBJECT: SHRINK WRAP INDUSTRIES LLC

Ref. Number: L19000066642

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE DATE AND SIGN THE DOCUMENT ON PAGE 3 OF 3 AND RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Y 13 MH II: 50

Letter Number: 119A00008359

COVER LETTER

TO: Registration S Division of Co			
Shrink W	rap Industries		
30D3EC, 1.	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Craig Fenn		
	Shrink Wrap Industries	Name of Person	for filing. following: Name of Person Firm/Company Address (State and Zip Code led for future annual report notification) at (
	12854 Carrington Circle #2	Firm/Company 03	
	Naples, FL 34105	Address	
	craig@shrinkwrapindustries.		
		,	ication)
For further information of	concerning this matter, please ca	.H;	
Craig Fenn			
Name c	of Person		: Telephone Number
Enclosed is a check for ti	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

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

Shrink Wrap Industries LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our record Liability Company)	<u>ds.</u>)
he Articles of Organization for this Limited Liability Company lorida document number L19000066642	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2011 SE
Principal office address MUST BE A STREET ADDRESS)		2019 HAY SECRET
		مستعم مساحية
Enter new mailing address, if applicable:		ASSET OF S
Mailing address MAY BE A POST OFFICE BOX)		FL IZ
3. If amending the registered agent and/or registered o egistered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records e:	s, enter the name of the ne
New Registered Office Address:	Enter Florida street addres.	У
		orida
	Cuy	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

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
MGR	Craig Fenn	12854 Carrington Circle #203 Naples, FL 34105	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00