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oun ira	REmaginati	ion, LLC	*			
SUBJEC	1: 	Name of Lim	ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ret	um all correspo	ndence concerning this matter	to the following:			
		Rachel Rich-Guzi				
			Name of Person			
		REmagination, LLC				
			Firm/Company			
		3740 N. 54th Avenue				
		Address				
		Hollywood, FL 33021				
		City/State and Zip Code				
		rachel@spicybox.com		<u>. </u>		
		E-mail address: (to be used for future annual report no	lification)		
For furthe	r information co	oncerning this matter, please ca	all:			
Rachel Ri	ich-Guzi		383-6638 at (7-8-(0)			
	Name of	f Person	Area Code Daytir	me Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25.0	0 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)		
,	Mailing Addres	ç.	Street Address:			

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REMAGINATION, LLC

21 APR -5 AMII: 47

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

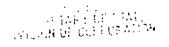
The Articles of Organization for this Limited Liability	Company were filed on 06/14/20	and assigned
Florida document number L19000157561	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records :	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
<u> </u>	, <u>, , , , , , , , , , , , , , , , , , </u>	, Florida
	City	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 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>	<u>Address</u>	21 APR -5 AM 11: 47	Type of Action
AMBR	Ohad Guzi - PRESIDENT	3740 N. 54th	Ave	= Ad d
		Hollywood, F	L 33021	□ Remove
				Change
				□Add
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:	PLEASE ADD MR. OHAD GUZI AS THE PRESIDENT AND AS AN AUTHORIZED
=	MEMBER TO REMAGINATION, LLC.
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ffect	ive date, if other than the date of filing: (optional) fective 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 605.020
ote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocum	nent's effective date on the Department of State's records.
recor I is fi	d 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 led.
	MARCH 30 2021
ated	MARCH 30 , 2021
	Daniel Wintertain

Typed or printed name of signee