To: 13506176383 From: 14693173436 Date: 11/12/19 Time: 9:18 AM Page: 01/04

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190003325073)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 : (844)386-0178 Phone : (214)317-4754 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRIND LEAGUE PRODUCTIONS, LLC

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Certificate of Status	0 r
Certified Copy	0
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Estimated Charge	\$25.00

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To: 18506176383 From: 14693173436 Date: 11/12/19 Time: 9:18 AM Page: 02/04

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H19000332507 3)))

Grind League Productions, LLC			
(Name of the Limited Liability Company as it now appears on o (A Florida Limited Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{09/19/20}{1}$	119		_ and assigned
lorida document number E.19000229618			•
his amendment is submitted to amend the following.	<b>5</b> 5. (	51.93	
A. If amending name, enter the new name of the limited liability company here:		NSN E	
he new name must be distinguishable and contain the words "Limited Liability Company," the designa	tion "LLC" or	thefaBhre	vintion #L. L. C. "
Inter new principal offices address, if applicable:	:	ับ	** !
Principal office address MUST BE A STREET ADDRESS)	ŗ.	1-2 Ti.	
	<u> </u>	( <sub>E</sub> )	
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BON	<del></del>		
3. If amending the registered agent and/or registered office address on our egistered agent and/or the new registered office address here:	records, <u>e</u>	nter m	e name or me i
Name of New Registered Agent:	<del></del>		
New Registered Office Address:			
Enter Florida so	ver address		
	, Floric	la	
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 morely reflect a change in the registered office address. I hereby confirm that the limited hability company has been notified in writing of this change.

It Changing Registered Agent, Signature of New Registered Agent

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

	R = Manager (((H19000332507 3))) IBR = Authorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Dakota Buckner	2321 Laguna Circle , Apt 507, North Miami, FL, US, 33181	
			□ Remove
			□ Remove
			Change
		<del></del>	□ Remove
			Change
	<del></del>		Add
			□ Remove
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			☐ Remove
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			□ Remove
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**************************************		
		<del></del>
Effective date, if other than the offenellective date is listed, the date must Note:  If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutor	(optional) ing or more than 90 days after lifting ) Pursuant to 605 0207 () ry filling requirements, this date will not be listed as the
ne record specifies a delayed The 90th day after the reco		ctive time, at 12:01 a.m. on the earlier of:
Dated November 11th	2019	
	· · · · · · · · · · · · · · · · · · ·	
Val	Signature of a member or authorized represe	entative of a member
,	-	
Vivek Jayaram		

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