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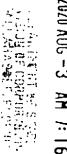
| (Requestor's Name)                      |  |  |
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| PICK-UP WAIT MAIL                       |  |  |
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| Certified Copies Certificates of Status |  |  |
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| Special Instructions to Filing Officer: |  |  |
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#### **COVER LETTER**

TO:

| FO: Registration Se<br>Division of Cor |  |  |   |
|--|--|--|---|
| Basket Cate                            | th LLC   |  |   |
| SUBJECT:                               | Name of Lim  | ited Liability Company   |   |
| The enclosed Articles of               | Amendment and fee(s) are sub                         | emitted for filing.  |   |
|  | ondence concerning this matter                       | -  |   |
|  | Robert J. Chalfin                                    |  |   |
|  |  | Name of Person   |   |
|  | Basket Catch LLC                                     |  |   |
|  | <del> </del>   | Firm/Company   |   |
|  | 83 Clarendon Court                                   |  |   |
|  |  | Address  |   |
|  | Metuchen, NJ 08840                                   |  |   |
|  | <del></del>  | City/State and Zip Code  |   |
|  | bob@chalfin.com                                      |  |   |
| For further information c              | E-mail address: (<br>oncerning this matter, please c | to be used for future annual report not<br>all:                  | ilication)  |
| Robert J. Chalfin                      |  | 732 423-1873   |   |
| Name o                                 | f Person   | at ()<br>Area Code Daytin  | ne Telephone Number   |
| Enclosed is a check for th             | ne following amount:                                 |  |   |
| ■ \$25.00 Filing Fee                   | ☐ \$30.00 Filing Fee &<br>Certificate of Status      | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
| Mailing Addres                         |  | Street Address:  |   |
| Registration Section                   |  | Registration Sc<br>Division of Co                                |   |
| Division of Corporations P.O. Box 6327 |  | The Centre of  | -   |
| Tallahassee, FL 32314                  |  | 2415 N. Monroe Street, Suite 810                                 |   |

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT $\mathbf{TO}$ ARTICLES OF ORGANIZATION OF.

Basket Catch LLC

(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 September 17, 2019 Florida document number L19000234833 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Principal office address MUST BE A STREET ADDRESS) Metuchen, NJ 08840

Enter new principal offices address, if applicable:

c/o Robert J. Chalfin Enter new mailing address, if applicable: 83 Clarendon Court (Mailing address MAY BE A POST OFFICE BOX)

Metochen, NJ 08840

e/o Robert J Chalfin

83 Clarendon Court

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

James Engelmann Name of New Registered Agent:

3926 Round Table Court New Registered Office Address: Enter Florida sireci address

\_\_\_, Florida <sup>34638</sup> Zip Code Land O' Lakes

Cirv

#### 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.

TMUS ENGLAVIA L nging Registered Agent, Signature of No

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 |
|--------------|-------------|-------------|----------------|
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| E. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the | he date of filing:  |
| If the record specifies a dela<br>(b) The 90th day after the i  | ved effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed. |
| Dated July 29   | 2020  |
|   | Signature of a member or authorized representative of a member                                  |
| l   | Signature of a member or authorized representative of a member                                  |

Page 3 of 3

Typed or printed name of signee