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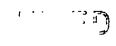
Tallahassee, FL 32314

	Registration Se Division of Cor			
eun iez	Roar, LLC			
SUBJEC	.I:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Anna M Xiques		
			Name of Person	
		Roar, LLC		
			Firm/Company	
		6625 Eagle Nest Lane Apt	103	
			Address	
		Miami Lakes, FL 33014		
		-	City/State and Zip Code	
		info@thisisroar.com	to be used for future annual report i	notification)
For furthe	er information c	oncerning this matter, please c		in the army
Anna M	Xiques		786 270-7116	5
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed	is a check for th	ne following amount:		
	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)
	Mailing Addres Registration S		Street Address Registration	
	Registration of C		Division of C	
	P.O. Box 632			f Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2020 FEB 24 PH 12: 17

Roar, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on o Liability Company)	our records.)
The Articles of Organization for this Limited I Florida document number L19000258675	Liability Company	were filed on October	15. 2019 and assigned
his amendment is submitted to amend the fol	lowing:		
a. If amending name, enter the new name	of the limited liah	ility company here:	
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	6625 Eagle Nest Lane	
Principal office address MUST BE A STRE	ET ADDRESS)	Apt 103	
		Miami Lakes, FL 330	
Inter new mailing address, if applicable:		6625 Eagle Nest Lane	
Muiling address MAY BE A POST OFFICE	E BOX)	Apt 103	
		Miami Lakes, FL 330	014
3. If amending the registered agent and/or gent and/or the new registered office addro			ls, enter the name of the new registe
	6625 Fagle Nes	st Lane Apt 103	
New Registered Office Address:	TODO IMPIETO	Enter Florida str	reet address
	Miami Lakes		, Florida 33014
		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>	Type of Action
MGR	Anna M Xiques	6625 Fagle Nest Lane Apt 103	
		Miami Lakes, FL 33014	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
		·	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: (It'an 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.
If the record 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 record is filed.
Dated Tebruary 17 2020 August Kares Signature of a member or authorized representative of a member
Signature of a member or authorized representative of a member
Typed or printed name of signee

Filing Fee: \$25.00