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COVER LETTER

TO:

Registration Section
Division of Corporations

	Name of Lin	ited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspor	ndence concerning this matter	to the following:			
	PETER W. NIBERT				
		Name of Person			
	GET LEGENDARY LLC				
		Firm/Company			
	15/20 GUAGUANE TO				
	15439 SHOSHONE TR	ALL Address	~		
	BROOKSVILLE, FL	34604	20237		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code			
	PNIBERT 8	to be used for future annual report noti	±. ⊗		
	E-mail address: (to be used for future annual report noti			
For further information co	Pri bert 83 neerning this matter, please c	all:	· ·		
PETER W. NIBERT		0.20	ω 1 4 3 3		
Name of Person		at (<u>') 2 7</u>) <u>85-9 - 3</u> Area Code Daytim	c Telephone Number		
Enclosed is a check for the	e following amount:				
区 \$25.00 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 Address Registration So	ection	<u>Street Address:</u> Registration Se Division of Cor			
Division of Corporations P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GET LEGENDARY LLC.			
(Name of the Limited Li (A F	iability Company a lorida Limited Liabi	s it now appears on our records.) htty Company)	
The Articles of Organization for this Limited Liabili	ity Company wei	re filed on1/28/2020	and assigned
Florida document number <u>L20000034882</u>	 '		
This amendment is submitted to amend the following	ıg:		
A. If amending name, enter the new name of the	limited liability	company here:	
Get Legendary LLC.			
The new name must be distinguishable and contain the words."	"Limited Liability C	Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		15439 Shoshone Trail	
Principal office address MUST BE A STREET ADDRESS)		Brooksville, FL 34604	
	_		
			53
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
			· · · · · · · · · · · · · · · · · · ·
	_		5.
			•: ::
 If amending the registered agent and/or regist igent and/or the new registered office address he 	tered office addi re:	ress on our records, <u>enter the na</u>	••
	 -		(.) (.)
Name of New Registered Agent:	Peter W. Nib	ert	
New Registered Office Address:	15439 Shosho	· · · · · · · · · · · · · · · · · · ·	
		Enter Florida street address	
_	Brooksville	. 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 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>	Name	Address	Type of Action
Manager	Peter W. Nibert	15439 Shoshone Trail Brooksville, FL 34604	∑ Add
			□Remove
			□Change
	·		□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Ghange _= :
	-		□Add ○ □Rèmove
			□ Change
			□ Add
			□Remove
			□ Change
			🗆 Add
			⊟Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) the reason for the amendment is because the without listing myself Peter W. Nibert as Manager of Get Legendary LLC. E. Effective date, if other than the date of filing: 128 2020 (optional) (If 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 Z-ZO-ZO Signature of a member or authorized representative of a member

Typed or printed name of signee

Peter Nibert