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.

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To:			
	Division of Corporations		
	Fax Number : (850)617-6383		
Fro	om:		
	Account Name : REGISTERED AGENTS INC.		
	Account Number : 120090000081		
ŝ	Phone : (307)200-2803		=
ហ	Fax Number : (855)330-1010		→
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Ξ	**Enter the email address for this busine	ess entity to be used for future	
	annual report mailings. Enter only o	ne email address please.**	2020 FEB
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	Page Count	04	
	Estimated Charge	\$25.00	

Electronic Filing Menu

Corporate Filing Menu

Helps (II KEP

FEB 2 8 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Giggle LLC			
(<u>Name of the Limited Liability C</u> (A Florida Lin	lompany as it now appears on mited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Com	npany were filed on 2/5/20)	and assigned
lorida document number L20000043035			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	I liability company here:		
he new name must be distinguishable and contain the words "Limited	Liability Company," the desig	nation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		•~	28
Principal office address MUST BE A STREET ADDRES	<u> </u>		120 E
			27
Inter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)			
			2000
 If amending the registered agent and/or registered of gent and/or the new registered office address here: 	ffice address on our reco	rds, <u>enter the na</u>	ime of the new regist
Name of New Registered Agent:	- MINOR		
	William .		
Name of New Registered Agent: New Registered Office Address:	Enter Florida	street address	
	Enter Florida	street address , Florida	

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	<u>Address</u>	Type of Action
MGR	KURODAI LLC	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	■Remove
			□ Change
AMBR	MICHAEL ZEVALLOS	7901 4TH ST N STE 300	= Add
		ST. PETERSBURG, FL 33702	□Remove
			□Change
AMBR	JARED KOGAN	7901 4TH ST N STE 300	= Add
		ST. PETERSBURG, FL 33702	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			Change
			□Add
			Remove
			□Change

Iffective date, if other than the date of filing: [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 605.020 soite: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a locument's effective date on the Department of State's records. 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 dis filed. Acted February 27 2020 Signature of a member or authorized representative of a member					
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		Signature of a member or auth	orized representative of	a member	
	Riley Park		ed name of signee		

Filing Fee: \$25.00