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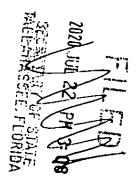
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Special Instructions to	Filing Officer:	

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COVER LETTER

Registration Section Division of Corporations

TO:

CHD IPCT.	VOLUME, LLC		
SUBJECT:	Name of Lim	ited Liability Company	······································
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Scott A. Sandroff		
	•	Name of Person	
	Scott A. Sandroff, LLC		
		Firm/Company	Field 1
	111 S. Pfingsten Road, Sui	ite 114	
		Address	THE REPORT OF THE PARTY OF THE
	Deerfield, IL 60015		γ -
		City/State and Zip Code	20:
	ssandroff@ssandroff.com		2020 JUN 22
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	22
Scott Sandroff		847 513-6101	JUN 22 PM
Name o	f Person	at () Area Code Daytime	Telephone Number 2
Enclosed is a check for the	ne following amount:		
■ \$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 S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address: Registration Sec Division of Corp The Centre of To	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Volume, 1	LLC		
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records ability Company)	.)	
(**************************************	activity and a state of the sta		
The Articles of Organization for this Limited Liability Company v	were filed on March 2, 2020		and assigned
Florida document number L20000069865			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
Volume Holding Cor	npany, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC"	or the abb	reviation "L.L.C,"
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		243	Æ
Tricqui office unitess HOST DE ASTREET ADDRESS		728/	TI
		75	12 15-
Catan and mailing address if applicables		ا بجمین ایم ایم ایم ایمان	/2/ 727
Enter new mailing address, if applicable:		-,7	1 -7
Mailing address MAY BE A POST OFFICE BOX)		— <u>— — (, , , , , , , , , , , , , , , , , ,</u>	() () () () () () () ()
		 	<u>a//</u>
		>	<u>.</u> 0
3. If amending the registered agent and/or registered office a	ddress on our records, <u>enter t</u>	he name	of the new regist
gent and/or the new registered office address here:			2020
)
Name of New Registered Agent:		1	\$ 77
	•	64100 101 mg	11
New Registered Office Address:	Enter Florida street address	10 m	<u> </u>
	r.mer r iorida sireet address	5.7	F II
	, Flo	rida:	အိုးb Code
	City	N. C.	Z ip 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>	Name	Address	Type of Action
			□Add
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			□Change
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effectiv	date, if other the date is listed, the ne date inserted in	date must be n this block	specific and does not n	cannot be	prior to date	of filing or tatutory fili	more than 9	0 days afte ments, th	er filing.) iis date v	Pursuan vill not	it to 605.02 be listed
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Filing Fee: \$25.00