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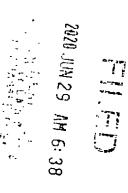
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AUG 1 2 2020 S. YOUNG

COVER LETTER

	TO: Registration Section Division of Corporations					
SUBJEC		vations Group LLC				
SOBJEC	· i :	Name of Lin	nited Liability Company	<u> </u>		
The encle	osed Articles of	Amendment and fee(s) are sul	omitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Stephen Blake				
			Name of Person	······································		
		Blake Innovations Group	LLC			
	Blake Innovations Group LLC Firm/Company					
		515 E Las Olas Boulevard	1 STE 120			
			Address			
		Fort Lauderdale, FL 3330	01			
			City/State and Zip Code			
		steve@blakeinnovationsgn	-			
For furth	er information o	concerning this matter, please c	to be used for future annual report no all:	uncation		
Stephen	Blake		954 869-2280 at ()			
	Name o	f Person		me Telephone Number		
Enclosed	is a check for the	ne following amount:				
■ \$25. 0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addres Registration S		Street Address: Registration So	ection		
ł	Division of C	Corporations	Division of Co	rporations		
	P.O. Box 632 Fallahassee, l			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

Suite 120 Fort Lauderdale, FL 33301 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: Name of New Registered Agent: New Registered Office Address:	Blake Innovations Group LLC		-1 2
Florida document number L20000079823 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33301 B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
Florida document number L20000079823 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33301 B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	The Articles of Organization for this Limited Liability Company	and assigned	
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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address:			A COURT
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33301 B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	This amendment is submitted to amend the following:		de grant
Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address may be a post of price address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	A. If amending name, enter the new name of the limited liab	oility company here:	, 8
Suite 120	The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Fort Lauderdale, FL 33301 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Suite 120 Fort Lauderdale, FL 33301 B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter new principal offices address, if applicable:	515 E Las Olas Boulevard	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Suite 120 Fort Lauderdale, FL 33301 B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(Principal office address MUST BE A STREET ADDRESS)	Suite 120	
(Mailing address MAY BE A POST OFFICE BOX) Suite 120 Fort Lauderdale, FL 33301 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: Name of New Registered Agent: New Registered Office Address:		Fort Lauderdale, FL 33301	
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(Mailing address MAY BE A POST OFFICE BOX)	Suite 120	
Name of New Registered Agent: New Registered Office Address:		Fort Lauderdale, FL 33301	
New Registered Office Address:	B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the n	ame of the new registered
	Name of New Registered Agent:		
Protein Plant In the control of the	New Registered Office Address:		
Enter Florida street address		Enter Florida street address	
, Florida			
City Zip Code		City	Zip Code

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 heing 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>	<u>Name</u>	Address	Type of Action
MGR	Stephen Blake	411 Walnut Street	□Add
		#16856	_
		Green Cove Springs, FL 32043-3443	■Change
			□Remove
			□Change
			□Add
			□ Remove
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Effective date	if other than ti	he date of filis	na			/4:t\	
TANKET IL DIE CE	e is listed, the date me te inserted in this ective date on the	DIOCK GOCS HOL	meet the appr	icable statutor	/ Illing requireme	ents, this date	Pursuant to 605.020 will not be listed a
record specifi d is filed.	es a delayed effect	tive date, but no	ot an effective	time, at 12:01	a.m. on the carlie	er of: (b) The	e 90th day after the
	h		2020	·			
Dated							
Dated June 250	Fast	Bla	h				
Dated June 25	Agol	Signature of a	L member or aud	norized represen	tative of a member	r	

Filing Fee: \$25.00