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COVER LETTER

TO:	Registration Sec Division of Corp				
		s Creative LLC			
SUBJE	CT:				
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please r	eturn all correspoi	ndence concerning this matter	to the following:		
		Farrah Gauthier			
			Name of Person		
		Pocket Aces Creative LLC			
			Firm/Company		
		1370 Dakota Drive			
			Address		
		Jupiter, FL 33458			
			City/State and Zip Code		
		FarrahGauthier@gmail.com	to be used for future annual report notific		
For furtl	her information co	oncerning this matter, please ca	·	attoni	
		matter, prease co			
Farrah (lauthier	<u> </u>	646 715-8244 at ()	Telephone Number	
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	d is a check for th	e following amount:			
,	.00 Filing Fee	Certificate of Status	\$55,00 Filing Fee & rtified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration S		<u>Street Address:</u> Registration Sect	ion	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

Pocket Aces Creative LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 26000 10085</u> 5	1	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
Gauthier Creative Group LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	·	
		3
Enter new mailing address, if applicable:	N/A	DCT 2
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	7:10:01
		5
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registers
Name of New Registered Agent:	N/A	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	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 being filed to merely reflect a change in the registered office address. Thereby 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		N/A	□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
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			☐ Change
			□ Add
			□Remove
			□Change

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(If an ef Note:	ive date, if other than the date of filing: 10 ABB 2020 (optional) fective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	October 14 2020 duy D May Hb 101
	Signature of a member or authorized representative of a member
	Farrah Gauthier Typed or printed name of signee

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