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Certified Copies	Certificates o	of Status
		
Special Instructions to Fil	ing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tri Pak Hold.	Limited Liability Company
The enclosed Articles of Amendment and fee(s) are	_
Please return all correspondence concerning this ma	tter to the following:
hata	Name of Person
Tr. Pal	L Holdings LLC Firm/Company
2114	N Flamingo RD #212 Address
-Pembrode	City/State and Zip Code Scholle Vortigue 2004 ss: (to be used for future annual report notification)
K-Von S E-mail addre	Scholle Vartique .com ss: (to be used for future annual report notification)
For further information concerning this matter, pleas	se call:
hataring un Scholl Name of Person	at (305) 915 - 2223 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$30.00 Filing Fee & Certificate of Status	
Mailing Address: Registration Section	Street Address: Registration Section

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

Tri Pak Holdings	LLC	20
(Name of the Limited Liability Company (A Florida Linited Lia	as it now appears on our records.) bility Company)	是 2
The Articles of Organization for this Limited Liability Company w	ere filed on $\frac{5/3/202}{}$	andassigned
Florida document number $L2000129271$.	/ /	6
This amendment is submitted to amend the following:		·
A. If amending name, enter the new name of the limited liabili	ty company here:	
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)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
 	Enter Florida street address	
	, Florid	la Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Ciņ	esp Cour
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete percept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office as	erformance of my duties, and 1 ovided for in Chapter 605, F.S	am familiar with and Or, if this document is

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
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Owner		1451 lepe St Hollywood, FC 33024	□Remove
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an effe <u>lote:</u> l	ve date, if other than the date of filing:
record Lis file	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 d.
ated _	5/3/2020) () () () () () () () () () () () () ()
	Signature of a member withorized representative of a member
	Mataria un Scholl Typed or printed name of signee