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COVER LETTER

TO:

TO: Registration So Division of Cor			
	R BY GENEVA LABEL 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:	
	LLOYD K. MARCUS		2022
		Name of Person	
	MARCUS AND MARCUS	S	1872 JUL 18 PM 3: 45
		Firm/Company	
	439 ARGUELLO BOULE	VARD SUITE 6	PM 3: 45
		Address	
	SAN FRANCISCO, CA 94	4118	
		City/State and Zip Code	<u> </u>
	LLOYD@MARCUSANDM		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
LLOYD MARCUS		415 751-3091	
Name (of Person		e Telephone Number
Enclosed is a check for a	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		<u>Street Address:</u> Registration Se	ection
Registration Division of (Division of Co	
P.O. Box 63	-	The Centre of T	Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIGNATUR BY GENEVA LABEL LLC (Name of the Limited Liability Compa (A Florida Limited Liability Compa)	nv as it now appears on our records.)			
The Articles of Organization for this Limited Liability Company Florida document number 1.20000131597 This amendment is submitted to amend the following:	were filed on MAY 15, 2020		and ass	signed
A. If amending name, enter the new name of the limited liab WSTWN LLC	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbrevi	ation "L	L.C."
			~ **	
Enter now principal offices address if applicables	1000 BRICKELL AVENUE	-7.	2025	
	1000 BRICKELL AVENUE SUITE 715		2022 JU	<u>-n</u>
		7. 2. 434	1 - 101	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SUITE 715		81 TAL	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	SUITE 715		JU 18 FK	
	SUITE 715 MIAMI, FL 33131		1 8 1 TOL	

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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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			□Remove
			□Change
			— □Add 22 — ÆRemove!!
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SUITE 715		
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1000 BRICKELL AVENU	Ē	
SUITE 715		2072
MIAMI, FL 33131		
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	ist be specific and cannot be prior to date of filing or clock does not meet the applicable statutory fi	(optional) r more than 90 days after filing.) Pursuant to 605.0207 ling requirements, this date will not be listed as
record specifies a delayed effect d is filed.	ve date, but not an effective time, at 12:01 a.r.	m, on the earlier of: (b) The 90th day after the
JULY 14 Dated	. 2022	

Typed or printed name of signee