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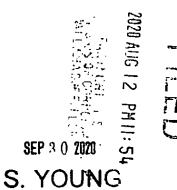
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(Document Number)
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COVER LETTER

TO: Registration Section **Division of Corporations**

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scan Young
Name of Person)
IDcal CutZ
Firm/Company
5948 OKecchobee Blvd
Address
West Palm beach FL 33417
City/State and Zip Code
City/State and Zip Code Scan Joung The Artist L. E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
cerning this matter, please call:
10000 501 7275486

For further information con-

Enclosed is a check for the 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 Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		iv as it now appears on our inability Company)	records.)	7000 PUG 15
The Articles of Organization for this Limited Lia		were filed on Dul	108360	andgessigned
A. If amending name, enter the new name of the Sean Young The	the limited liabil	10	-: · ·	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET	ble:	ty Company." the designation 59 H8 Ok West Palw		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	Mest Palm	iecchol Beach	pec Blud
B. If amending the registered agent and/or regard and/or the new registered office address		ddress on our records, <u>s</u>	enter the name of	the new registered
Name of New Registered Agent: New Registered Office Address:	<u>5948</u>	DKech	obec	RIVd
	West	- D ,	1. Florida	3 H 1 T

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

MGR Sean Young 5948 Okeechobee	111.5
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lf an effi <u>Note:</u>	ve date, if other than the date of filing: Ob 1 Optional) retive 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 ent's effective date on the Department of State's records.
e record	I 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
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Dated ;	· · · · · · · · · · · · · · · · · · ·
	The officer of the same of the
	Signature of a member of authorized representative of a member
	Signature of a member or authorized representative of a member Secure Gung Typed or printed name of signee