L20000196786

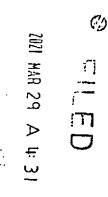
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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COVER LETTER

| | Division of Cor | | | |
|----------------|---|--|---|--|
| SUBJEC | | ger Holdings, LLC | | |
| SUBJEC | 1: | Name of Lin | nited Liability Company | |
| The enclo | sed Anicles of | Amendment and fee(s) are sub | omitted for filing. | Ç |
| Please ret | urn all correspo | ndence concerning this matter | to the following: | |
| | | Radosveta Rizzo | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | - 50 East Rd | | |
| | | | Address | |
| | | Delray Beach, FL 33483 | | |
| | | | City/State and Zip Code | |
| | | joy.rizzo@usa.com | to be used for future annual report notit | |
| For furthe | r information o | oncerning this matter, please c | · | ication) |
| Radosveta | | | | : |
| | Name of | Sh | at () | |
| | Name of | Person | Area Code Daytime | Telephone Number |
| Enclosed i | is a check for th | e following amount: | | |
| \$25.00 | 0 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| R C P | Aailing Address Registration S Division of Co 2.O. Box 632 Tallahassee, F | ection orporations 7 | Street Address: Registration Sec Division of Corp The Centre of Tallahassee, FL | porations 20 Table 1810 Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Honey Badger Holdings, LLC | | | | | | |
|--|---|--------------------------|--|----------------------------|------------------------------------|------------------------|
| (<u>Name of the Limited Liabilit</u> (A Florida | ity Company a Limited Lia | as it now ap | pears on our re ty) | cords.) | | |
| The Articles of Organization for this Limited Liability C Florida document number <u>L20000196786</u> | Company w | ere filed on | 7/9/2020 | | and as | ssigned |
| This amendment is submitted to amend the following: | | | | | | |
| A. If amending name, enter the new name of the limi | ited liabili | ty compan | <u>v here</u> : | | | |
| The new name must be distinguishable and contain the words "Lim | nited Liability | Company," i | he designation | 'LLC" or the a | obbreviation "I | IC." |
| Enter new principal offices address, if applicable: | | | | | | |
| (Principal office address MUST BE A STREET ADDR | RESS) | | | | | |
| | | | | | | |
| Enter now mailing address if applicables | | | | | | |
| Enter new mailing address, if applicable: | | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | • | | | | • | |
| | | | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | d office ad | dress on ou | ır records, <u>er</u> | nter the nar | ne of the ne | ew register |
| N. C.V. D. C. LA | | | | | | |
| Name of New Registered Agent: | | | | | <u>-</u> | |
| New Registered Office Address: | | Finter | Florida street ac | ddress | | |
| | | ., | , 10, 11, 11, 11, 11, 11, 11, 11, 11, 11 | | | |
| | | Ciţv | - | Florida | Zip Code | |
| New Registered Agent's Signature, if changing Registered | ed Agent: | · | | | | |
| I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence the obligations of my position as registered agone the obligations of my position as registered agone in the registere of the property of this change. | complete pagent as pro gent as pro- ed office a | erformance ovided for | e of my dutie. in Chapter 6 | s, and I am 05, F.S. Or | familia∰v ;-if this <u>d</u> oc | ith and " nument is |
| • | | | | | · > | 111 |

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 | Beatrice Rizzo | 50 East Rd | bbA □ |
| | | Delray Beach, FL 33483 | _ |
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| fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 oute. If the date inserted in this block does not meet the applicable statutory filing requirement of State's records. | _ (optional) ays after filing.) Pursuant to 605,020 ants, this date will not be listed a |
| | 2021 73.1 i |
| record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli | • |
| is filed. | , page 20 - 20 - 20 - 20 - 20 - 20 - 20 - 20 |
| March € Q 5 + 2021 | 29 / |
| ated $\frac{\text{March } \bullet \circ \circ$ | |
| Ladille Son | <u> </u> |
| Signature of a member or authorized representative of a membe | ≣⊥ ω |

Filing Fee: \$25.00