Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:				
Division of Co				
Fax Number	: (850)617-6383			
From:				
Account Nam	e : REGISTERED AGENTS INC.			
	ber : I20090000081			
	(307)200-2803			
Fax Number	: (855)330-1010		. .	(
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	Estimated Charge	\$25.00		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOLFPACK MARKETING LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our record Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compar Florida document number L20000229755	ny were filed on <u>07/31/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "Lt	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		7070
Enter new mailing address, if applicable:		٠
(Mailing address MAY BE A POST OFFICE BOX)		>
		<u> </u>
		5.5
B. If amending the registered agent and/or registered registered agent and/or the new registered office address had a second agent.		ds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
	l	Florida
	= 2	•

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 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
AMBR	ABBATI, KAYLA	7901 4TH ST N STE 300	
		ST. PETERSBURG, FL 33702	☑ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change
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		***************************************	Change
			Add
			□ Remove
			Change

E. Effective date, if other than the date of filing: (If an effective 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 60.5% Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie (b) The 90th day after the record is filed. Sentember 8th 2020	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:	
C. Effective date, if other than the date of filing: (If an effective 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 605.0 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier by The 90th day after the record is filed.	
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September 8th 2020	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: after the record is filed.
Dated	mber 8th 2020
September 8th 2020 Rith Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00