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COVER LETTER

TO: Registration Division of C		:			
SUBJECT: Reb	el by Design, L	LC			
SUBJECT:		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corre	spondence concerning this matter	to the following:			
	Jasmine Jar	nes			
		Name of Person			
	Firm/Company				
	1712 Pione	er Ave			
		Address			
	Cheyenne, \	WY 82001			
		City/State and Zip Code			
	E-mail address: (to be used for future annual report not	ification)		
For further informatio	n concerning this matter, please c	all:			
Jasmine J	ames	at (307) 632-3	3333		
Nam	e of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check fo	r 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)		
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Rebel by Design, LLC

21 AUG 23 AH 9: 48

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 8/17/2020 and assigned	
Florida document number L20000252671		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1712 Pioneer Ave	
(Principal office address MUST BE A STREET ADDRESS)	Ste 500	
	Cheyenne, WY 82001	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1712 Pioneer Ave Ste 500	
	Cheyenne, WY 82001	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida City Zip Code	
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 = Ma	nager thorized Member	Address 21 AUG 23 AM 9: 48	
<u>Title</u>	Name	Address 21 AUG 23 APT 9. 32	Type of Action
MGR	ABC Consulting, LLC	1712 Pioneer Ave	□Add
		Ste 7000	i ∏ Remove
		Cheyenne, WY 82001	□Change
MGR	George Eugene Navarro	1712 Pioneer Ave	53 0 Add
		Ste 500	□Remove
		Cheyenne, WY 82001	□Change
			□Add
			Remove
			□Change
			□Add
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			□Remove

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Gerald Pitts, on behalf of ABC Consulting, LLC

Typed or printed name of signee