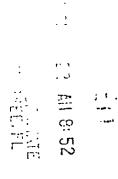
120000352662

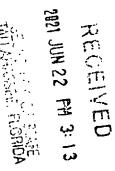
| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nar | me) |
| (Dc | ocument Number) | <u>, -</u> |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



600368195426





Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

| DATE 6/22/2021 | | ⇔WALK IN** |
|---|--|-------------|
| ENTITY NAME THE SCI | **PLEASE FILE THE ATTACHED AND RETURN** Plan Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certificate of Good Standing **APOSTILLE' / NOTARIAL CERTIFICATION** OF DESTINATION OF DESTINATION OF CERTIFICATES REQUESTED DOWED \$25.00 ACCOUNT #: 120160000072 | |
| | | |
| DOCUMENT NUMBER_ | | |
| | **PLEASE FILE THE ATTACHED AND RETURN** | |
| XXXX | Plain Copy | |
| | · · · · | |
| | Certificate of Status | |
| *************************************** | , and the second | |
| | Certificate of Good Standing | |
| | **APOSTILLE' / NOTARIAL CERTIFICATION** | |
| COUNTRY OF DESTINATI | TON | |
| NUMBER OF CERTIFICAT | TES REQUESTED | |
| TOTAL OWED \$25.00 | | |
| | | |
| Please call Tina at th | e above number for any issues or concerns. Thank you so | much! |

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

| The Scenic Shop LLC | | |
|---|--|------------------------------------|
| (Name of the Limited Liability Comp (A Florida Limited | pany as it now appears on our re I Liability Company) | ecords.) |
| The Articles of Organization for this Limited Liability Compan | y were filed on 01/01/2021 | and assigned |
| Florida document number L20000352662 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | |
| he new name must be distinguishable and contain the words "Limited Liab | bility Company," the designation | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | ·• | <u> </u> |
| | | |
| inter new mailing address, if applicable: | | |
| | | -,, |
| Mailing address MAY BE A POST OFFICE BOX) | - | <u> </u> |
| | | |
| 3. If amending the registered agent and/or registered office | e address on our records, <u>e</u> | nter the name of the new registe |
| gent and/or the new registered office address here: | | <u> </u> |
| N. C. | | 7 |
| Name of New Registered Agent: | | 11) 10 |
| New Registered Office Address: | Enter Florida street a | ddrass |
| | | |
| | City | , Florida |
| New Registered Agent's Signature, if changing Registered Agen | • | · |

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 | Robert Cabral | 13606 Via Roma Circle | |
| | | Clermont, FL 34711 | 🗀 Remove |
| | | | Change |
| | | | □Add |
| | | | □Remove |
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| Effective date, if other than the date of filing: (aptional) for effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Dustant to 605.0207 State of date inserted in this block does not meet the applicable standary filing requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date on the Department of State's records. The effective date on the date will not be listed as focus of the earlier of: (b) The 90th day after the dist filed. Dated [In 22nd 2021 [Is Allan A Cody-Rapport] Signature of a member of authorized representative of a member. | | | | _ | |
|---|--|------------------------------|--|--|---------------------------------------|
| 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 605.0207. [Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a locument's effective date on the Department of State's records. [Precord 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 dis filed. [Dated June 22nd 2021 2021 2021 2021 2021 2021 2021 202 | | | | | |
| Effective date, if other than the date of filing: | | | | | |
| ffective date, if other than the date of filing: | | | | <u> </u> | |
| ffective date, if other than the date of filing: | | | | | |
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| ffective date, if other than the date of filing: | | .,,- | , | , | |
| ffective date, if other than the date of filing: | | | <u> </u> | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The 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 date is filed. The 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 date date date date. | _ | | | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The 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 date is filed. The 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 date date date date. | | | | | |
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| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The 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 dis filed. The 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 dis filed. | | | | | |
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| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The second 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 dis filed. Dated | | <u> </u> | | | · · · · · · · · · · · · · · · · · · · |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to locument's effective date on the Department of State's records. The 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 dis filed. Dated | | <u>.,</u> | | | |
| Dated June 22nd 2021 | <u>Note:</u> If the date inserted in this blo | ock does not meet the appl | icable statutory filing req | (optional) nan 90 days after filing.) Pun nuirements, this date will | suant to 605.0207 not be listed as |
| | · · · · · · · · · · · · · · · · · · · | e date, but not an effective | time, at 12:01 a.m. on th | e earlier of: (b) The 90t | th day after the |
| Signature of a member or authorized representative of a member | June 22nd | 2021 | · · | | |
| Signature of a member or authorized representative of a member | | | D1 | | |
| | | /s/ Allan A Cody- | Kapport | | |

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Filing Fee: \$25.00