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R. HUNT 05/26/23

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: She	Sted	Shic	
	Name of Limite	d Liability Company	
The enclosed Articles of Amendment a	nd feets) are subm	itted for filing	
		-	
Please return all correspondence concer	img ins mater to	the following.	
$\overline{\mathcal{L}}$	Paige 1	Herzner	
	0	Name of Person	
		Atn	
		Firm/Company	
715	15 Ve	suvio Place	
Ba	otape	Beach Fl City/State and Zip Code	33437
1001	T:-mail address: (to	nail a ana	il.com
For further information concerning this	matter, please call	:	
Paige Kerz	ver	at (X13) XU	22605 ne Telephone Number
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\$25,00 Filing Fee	Filing Fee & cate of Status	S55.00 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		Street Address: Registration Se	ection
Division of Corporations		Division of Co	

P.O. Box 6327

Tallahassee, FL 32314

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

The Shed	$^{\prime}$ $\mathcal{D}\mathcal{N}$	IC					
(Name of the Limited) (A)	<mark>Liability Comp</mark> Florida Limited	i <mark>ny as it now at</mark> Liability Compa	pears on our recony)	ords.)		_	
The Articles of Organization for this Limited Liabi Florida document number L20063		were filed or	11/20	,20_	and :	assigned	
This amendment is submitted to amend the following	ng:						
A. If amending name, enter the new name of the Perzyer U. The new name is to be distinguishable and contain the words	LC.			LC" or the abbr	eviation	"L.L.C."	
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A		712 BO	o Vesi yaton	Pego.	Pla	<u>ce</u> 3343-	- (
Enter new mailing address, if applicable:			-			.	
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>		•				
B. If amending the registered agent and/or regis	stered office	address on o	ur records ent	er the name	f23	new registers	
agent and/or the new registered office address h	ere:	·	ar records, <u>enc</u>	RSA OF	26 PH	i i	_
Name of New Registered Agent:				E S			
New Registered Office Address:		Enter	Florida street addi	ress	61		
_			, 1	Florida			
		City			Zip Coo	:le	

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

D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	+ Please change:
,	
	The Shed Shic, LCC
	<u>+</u>
	Peige Kerzner, UC.
	if any guestions please cell
_	8138422(05 or gmai)
	nouveaunaila gmail-com.
	Then you
	PK
(If an effective on Note: If the	ate, if other than the date of filing:
If the record spec record is filed.	cities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated	5/20 2023.
_	Signature of a member or authorized representative of a member
	Peige Kerrner.
_	Typed or printed name of signee