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Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	05/28/2024					
	Patrice Rush					
	2381976					
	GATOR CAS	SES HOLDINGS, LLC				
☐ Article	es of Incorporation/Authorizatio	n to Transact Business				
✓ Amen	dment					
☐ Chan	ge of Agent					
Reinstatement						
☐ Conve	Conversion					
☐ Merge	☐ Merger					
☐ Dissolution/Withdrawal						
Fictition	ous Name					
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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	05/28/2024					
	Patrice Rush	_				
Reference	2381976	<u> </u>				
Entity Nan	ne: GATOR CAS	ES HOLDINGS, LLC				
☐ Arti	cles of Incorporation/Authorization	n to Transact Business				
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☐ Rei	Reinstatement					
Cor	Conversion					
☐ Me	rger					
☐ Dissolution/Withdrawal						
☐ Fict	titious Name					
☐ Oth	nerPLEASE PI	ROVIDE CERTIFIED COPY				
Authorized						
Signature:	- Pall					

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	Registration Se Division of Cor				
SHR IEZ	Gator Case	s Holdings, LLC			
SUBJEC	· · · <u> · · · · · · · · · · · · · · ·</u>	Name of Limi	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		Crystal Morris			
			Name of Person		-
		Gator Cases Holdings, LLC	C		
			Firm/Company		-
		934 Guiasando De Avila			
		_	Address		_
		Tampa, F1, 33613			
		crystal@gatorcases.com	City/State and Zip Code		-
			to be used for future annual rep	ort notification)	
For furth	er information c	oncerning this matter, please co	all:		
Crystal M	al Morris 813 221-4191 at ()				
Name of Person		Area Code	Daytime Telephone Number	Ή	
Enclosed	is a check for the	ne following amount:			
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certifie	ate of Status &

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Gator Cases Holdings, LLC

DocuSign Envelope ID. D3BF59AC-52F7-4269-8D41-FEC1E24DFA8C ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
(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 December 14, 2020 and assigned Florida document number L20000385040 This amendment is submitted to amend the following:				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	• •			
The new name must be distinguishable and contain the words "Limited Liabil	fity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	7851 Woodland Center Blvd.			
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33614			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7851 Woodland Center Blvd. Tampa, FL 33614			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	iddress on our records, <u>enter the name of the new registered</u>			
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
Now Designated Assets Circumstates if the print Designated Assets	·			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	vee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: D3BF59AC-52F7-4269-8D41-FEC1E24DFA8C in amending Authorized rerson(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>	<u>Address</u>	Type of Action
MGR	Crystal Morris	934 Guiasando De Avila	
		Tampa, FL 33613	■Remove
			☐ Change
			DAdd
			Remove
			□Add
			□Remove
			🗖 Remove
			Change
			Remove
			☐ Change
			\ _Add
			□Remove

_ □Change

The provision shall be rep	placed by the statement that the Co	ompany shall be member	-managed,
-			
			-
			
			
•			
-			
ective date if other than	the date of filing:		(optional)
effective date is listed, the date	must be specific and cannot be prior to	date of filing or more than s	90 days after filing.) Pursuant to 605.0
	s block does not meet the applicate Department of State's records.	ole statutory filing require	ements, this date will not be listed
unione 3 effective date on th	. Department of State 3 records.		
cord specifies a delayed effe s filed.	ctive date, but not an effective tim	ie, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after
, incu.			
. May 29	2024		
ed May 29	Signed by:	- '	
1	11		
Mike	. Ucm 8004 Signature of a member or author		

Filing Fee: \$25.00

TO:

	Registration Se Division of Cor			
SUBJEC	1717	s Holdings, LLC		
SODJEC.	· · · · · · · · · · · · · · · · · · ·	Name of Lim	ited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Crystal Morris		
			Name of Person	
		Gator Cases Holdings, LL	C	
			Firm/Company	
		934 Guiasando De Avila		
			Address	
		Tampa, FL 33613		
		crystal@gatoreases.com	City/State and Zip Code	
			to be used for future annual report no	otification)
For furth	er information o	oncerning this matter, please ca	all:	
Crystal Morris		813 221-4191 at()		
	Name o	f Person	at () Area Code — Dayti	me Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ \$ 25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate 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 Addres	<u>s:</u>	Street Address:	
	Registration S	Section	Registration S	
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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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