L21000053675

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JUNKANOO RIDDIMS ENTERTAINMENT, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RICK ALBURY Name of Person	
Name of Person	
JUNKANOO RIDDIMS ENTERTAINMENT, LLC.	
2835 N COURSE DR APT 101	
2835 N COURSE DR APT 101 Address	202: SE(
POMPANO BEACH, FL 33069 City/State and Zip Code	023 FEB -6 SECRLIARY
City/State and Zip Code	10元 6 1
RICK @ JUNKANOO RIDDIMS. Com E-mail address: (to be used for future annual report notification)	-6 AM 8
For further information concerning this matter, please call:	RY OF STATE
RICK ALBURY at 954 774 - 8025 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified (e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUNKANOO RIDDIMS ENTERTAINMENT, LLC.

(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 01/29/2021 and assigned Florida document number <u>L21000053675</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) 2835 N COURSE DR Enter new mailing address, if applicable: APT 101 POMPANO BEACH, FL 33069 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Enter Florida street address

, Florida

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
MGR	CHRISTOPHER GAY	3980 W BROWARD BLVD.	🗆 Add
	•	APT 315	Zerove
		FORT LAUDERDALE, FL 333.	12 □Change
			□Add
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II aine	iding any other information, enter change(s) here: (Attach additional sheets, if necess		
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Note:	f the date inserted in this block does not meet the applicable statutory filing requirements, this d nt's effective date on the Department of State's records.	ate will not	
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