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Registration Section

Tallahassee, FL 32314

TO:

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Amendment and fee(s) are sub	mitted for filing.			
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	Name of Person			
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	City/State and Lip Code		2.0	S. S. S.
E-mail address: (to be used for future annual report not	fication)		
oncerning this matter, please c	all:			
McCluve	289 2/47	أمالاما		
f Person				
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☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate Certified C	of Status &	
<u>s:</u>	<u>Street Address:</u>			
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chicagos Untouchables
(Name of the Limited Limited Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company Florida document number <u>L210008067</u>	
This amendment is submitted to amend the following:	SECRE TALL
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Niwhe MCLUre Songhill FU 34
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6818 U.S. HWY 19 New Port Richay, FL 34652
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registerec</u>
	HONG PIMO DC. Enter Florida street address Florida 34669 City Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agraphysions of all statutes relative to the proper and complete	ee to act in this capacity. I further agree to comply with the

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
AP	Roger Muller	Port Ridley, FT. 34468	□Add
	J	Port Ridley, FT. 34468	[VRemove
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fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of finete: If the date inserted in this block does not meet the applicable statut incument's effective date on the Department of State's records.	iling or more than 90 days after filing.) Pursua tory filing requirements, this date will no	ot be listed as
is filed.		
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Filing Fee: \$25.00