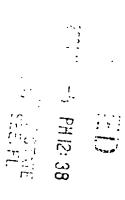
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
☐ FJCK-1	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer

Office Use Only



900365578839



MAY 05 2021

## Sunshine State Corporate Compliance Company

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

DATE 05/04/2021	_		******* * ** ***
			<i>₩WALK IN*</i>
ENTITY NAME PHOT	TO BOOTH 360 LLC		
DOCUMENT NUMBER	ι		
	**PLEASE FILE THE ,	ATTACHED AND RETURN**	
XXXX	Plain Copy		PRINTER PROJECT
	Certified Copy		
<del></del>	Certificate of Status		
	Certified Copy of Arts & Certificate at Cood Stord		
	Certified Copy of Arts & Certificate of Good Stands		* * * #* 3X
	**APOSTILLE' / NO	TARIAL CERTIFICATION**	
COUNTRY OF DESTIN	ATION	·	_
NUMBER OF CERTIFIC	CATES REQUESTED		<b></b>
TOTAL OWED \$25.0	0	ACCOUNT #: I20160000072	
		- 12 5%	
		y issues or concerns. Thank you so m	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Photo Booth 360 LLC

( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	<u>is.</u> )	
The Articles of Organization for this Limited Liability C Florida document number <u>L21000169050</u>	Company were filed on 4/12/2021	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
HQ PhotoBooth Co LLC			
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)		
Enter new mailing address, if applicable:		<del></del>	
Mailing address MAY BE A POST OFFICE BOX)			
		*- 1	
		· ·	
B. If amending the registered agent and/or registered	d office address on our records, <u>enter</u>	the name of the new register	
agent and/or the new registered office address here:			
M. CM. D. C. L.			
Name of New Registered Agent:		- 100 N	
New Registered Office Address:		<u> </u>	
	Enter Florida street addres	s 17: W	
	, Florida		
	City	Zip Code	
Sew Registered Agent's Signature, if changing Registered	d Agent:		
hereby accept the appointment as registered agent provisions of all statutes relative to the proper and concept the obligations of my position as registered ageing filed to merely reflect a change in the registere company has been notified in writing of this change.	gent as provided for in Chapter 605, .	$F.S.\ Or,\ if\ this\ document\ is$ :	
		•	
	If Changing Registered Agent, Signature o	f New Registered Agent	
		* * * * * * * * * * * * * * * * * * *	

3.5.

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
	<del></del>		. ,
			□Remove
		<del></del>	Change
			□Add
			j (1997) □Remove
			□ Change
<del></del>			
			l□Change
<del></del>			
			□Remove
			□Change
			LAdd
			□Remove
			□Change

		····			<del></del>
		<del></del> -	<del></del>		
					<del>-</del>
				<del></del>	
			<del></del>		<del>.</del>
fective date, if other than the in effective date is listed, the date muster. If the date inserted in this becument's effective date on the E	st be specific and cam lock does not meet	not be prior to date o the applicable sta	l filing or more than 90 da	ays after filing.) Pursua	ant tó 605.02) of be listed (
ecord specifies a delayed effectivis filed.	e date, but not an e	effective time, at 1	2:01 a.m. on the earlie	r of: (b) The 90th	day after the
ted		021			
/s/ Jessy Jean					
73/ JC35y JCan					
757 Jessy Jean	Signature of a memb	ber or authorized re	resentative of a member		<del></del>

Filing Fee: \$25.00

. , . . i