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Name:	IMPOSS	SIBLE KICKS	TWO LLC	
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COVER LETTER

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oun mor		E KICKS TWO LLC			
SUBJECT		Name of Lim	ited Liability Company	•	
The enclose	ed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspond	dence concerning this matter	to the following:		
		Cynthia C. Klaneski, Paral	egal		
			Name of Person		
		PULLMAN & COMLEY,	LLC		
			Firm/Company		
		90 State House Square, 13	th Floor		
			Address		
		HARTFORD, CT 06103			
			City/State and Zip Code		
		cklaneski@pullcom.com			
		· ·	to be used for future annual	report notification	1)
For further	information cor	ncerning this matter, please ca	all:		
Cynthia C.	Klaneski, Para	legal	860 54	1-3331	
	Name of I	Person	Area Code	Daytime Telep	hone Number
Enclosed is	a check for the	following amount:			
□ \$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is end		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P.	ailing Address: egistration So ivision of Co O. Box 6327 allahassee, Fl	ection rporations	Divisio The Ce 2415 N	ddress: ation Section on of Corporat ntre of Tallah Monroe Stre issee, FL 3230	assee eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMPOSSIBLE KICKS TWO 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 JULY 1, 2021 and assigned Florida document number L21000212320 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) P.O. BOX 1201 Enter new mailing address, if applicable: STRATFORD, CT 06615 (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 Office Address: Enter Florida street address _, Florida

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

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	IMPOSSIBLE KICKS HOLDING COMPANY LLC	P. O. BOX 1201, STRATFORD, CT 06615	
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			□Change
AMBR	MOCADLO, WAYNE M.		□Add
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