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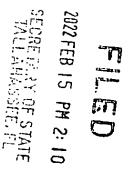
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(Business Entity Name)
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A. BUTLER MAR 2 - 2022

COVER LETTER

TO:

Registration Section

Division of Cor	rporations				
Shop Pink	LLC				
SUBJECT:	Name of Lin	nted Liability Company			
The enclosed Articles of	Amendment and feets) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Natalia Betancourt				
		Name of Person			
		Firm Company			
	Same of Person Farm Company				
		Address			
	Florida City, Fl 33034				
	natybata0\$68hatmail.com	City State and Zip Code			
		to be used for future annual repor	et notification)		
For further information e	oncerning this matter, please c	aff:			
Natalia Betancourt					
Name o	d Person	Area Code D	aytime Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25,00 Filing Fee		Certified Copy	Certificate of Status &		
		4.			
P.O. Box 632	27	The Centre	of Tallahassee		
Tallahassee, l	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shop Pink, LLC

2022 FEB 15 PM 2: 10

rA Florida Limiu	ed Fiability Company) SELECT	RY OF STATE
The Articles of Organization for this Limited Liability Compa	1AULA 25. 2 05/28/2021	HASSEE, FL
	ny were fifed on	and assigned
lorida document number 1.21000251240		
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
Shop Eleven Eleven, LLC		
the new name must be distinguishable and contain the words "I imited I is	ability Company." the designation "LLC" o	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable:		
••		
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
3. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Litter Florida street address	
	Flori	daZy/Code

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. Thereby 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>	<u>Address</u>	Type of Action
			[]Remove
		 · ··	☐Change
			T)Add
			URemove
			DChange
		···································	DAdd
			FIRemove
			□Change
		 	DAdd
			[]Remove
]Change
			JAdd
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			□Add
			□Remove
			□Change

							
							
			 				
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Note: If i		rthis block does no	it meet the appli	cable statutory fi		ptional) der (iling.) Pursuant to this date will not be	
e record s rd is filed.		effective date, but r	not an effective	time, at 12:01 a.n	n, on the earlier of	(b) The 90th day	after the
Fe Dated	bruary 11		2022	·			
		Ni	t B	L notized representat			
		Stepature of	a member of auti	iorizea representat	ve or a member		

Filing Fee: \$25.00