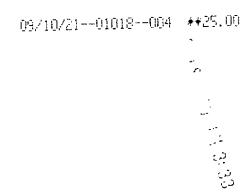
## LZ1000368803

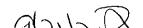
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Office Use Only



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## **COVER LETTER**

Registration Section

Division of Corporations

TO:

	Artic Sumn	ner LLC		•
SUBJECT: _		Name of Limi	ted Liability Company	
The enclosed	Articles of .	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Jacqueline Quiroga		
			Name of Person	<del></del> -
		ZenBusiness INC		
			Firm/Company	
		5511 Parkerest Drive STE	103	
			Address	
		Austin, Texas, 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		
		E-mail address: ()	o be used for future annual report no	otification)
For further in	formation c	oncerning this matter, please ca	ill:	
Jacqueline Q	uiroga c/o Z	ZenBusiness INC	844 493-6249 at ()	
	Name o	î Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
<b>≡</b> \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	ling Addres	Section	Street Address: Registration S	
		Corporations	Division of Co	
	. Box 632 lahassee, l		The Centre of 2415 N. Mont	roe Street, Suite 810
		<del></del> - ·	Tallahassee, F	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Artic Summer LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
. 1 .	and assigned
lorida document number 1.21000368803	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability company here:	
Artic Sommer LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office address on our records, <u>enter the nam</u>	e of the new regist
gent and/or the new registered office address here:	to?
NE CNED LA L	. •
Name of New Registered Agent:	<u>-</u>
New Registered Office Address:	
Enter Florida street address	
. Florida	<u>မှ</u>
Fidina	2in (15th

## 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>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			Remove
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fective date, if other than the data an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	does not meet the	e applicable	te of filing or mo statutory filing	(opt re than 90 days afte requirements, th	ional) er tiling.) Pursuant is date will not l	to 605.0207 be listed as t
record specifies a delayed effective d is filed.	ate, but not an effi	ective time,	at 12:01 a.m. o	n the earlier of: (	b) The 90th da	y after the
September 7th	. 202	l 				
			<i>t</i>			
	/s/ Adam enature of a member	J Gruno	en			