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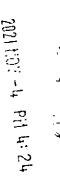
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Certified Copies Certificates of Status
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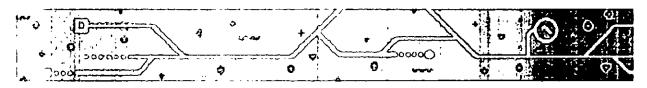
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zeabusiness

Oct 29, 2021

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallabassee, FL 32303

RE: Rest for the Wicked LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u> for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at (<u>IfIlment'a zenbusiness.com</u>).

Thank you,

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rest for the Wicked LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Horida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/23/2021 Florida document number 1.21000420545 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 "LLC." 4720 se 15th ave Enter new principal offices address, if applicable: 115 (Principal office address MUST BE A STREET ADDRESS) Cape Coral, FL 33904 4720 se 15th ave Enter new mailing address, if applicable: 115 (Mailing address MAY BE A POST OFFICE BOX) Cape Coral, FL 33904 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 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
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ote: If the date inserted in the date on the date of t	us biock does no)t meet the appl	icable statutory	or more than 90 da filing requiremen	ys after filing.) Purs its, this date will i	uant to 605,020 tot be listed a
record specifies a delayed eff is filed.	ective date, but i	not an effective	time, at 12:01 a	.m. on the earlier	of: (b) The 90th	a day after the
October 29		2021	·			
/s/Asia Po	adilla					

Filing Fee: \$25.00