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| Special Instructions to F             | Filing Officer:   |             |
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| 7                                     | J. HORNE          |             |
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## **COVER LETTER**

|                         | ation Sec<br>of Corp                         | tion<br>orations                                |   |  |
|-------------------------|--|---|---|--|
| Yan                     | d Party L                                    |   |   |  |
| SUBJECT:                | <del></del>                                  | Name of Lim                                     | ited Liability Company  |  |
| The enclosed Arti       | icles of A                                   | Amendment and fee(s) are sub                    | mitted for filing.  |  |
| Please return all o     | correspor                                    | ndence concerning this matter                   | to the following:   |  |
|                         |  | Michael Davis                                   |   |  |
|                         |  |   | Name of Person  | · · · · · · · · · · · · · · · · · · ·  |
|                         |  | Yard Party LLC                                  |   |  |
|                         |  |   | Firm/Company  |  |
|                         |  | 117 Brandywine Cir                              |   |  |
|                         |  | -   | Address   | <del></del>  |
|                         | Englewood, FL 34223  City/State and Zip Code |   |   |  |
|                         |  |   |   |  |
|                         |  | davismg772@gmail.com                            |   |  |
|                         |  | E-mail address: (                               | to be used for future annual report no                                    | tification)  |
| For further inform      | nation co                                    | ncerning this matter, please ca                 | all:  |  |
| Mike Davis              |  |   | 740 727-1649  |  |
|                         | Name of                                      | Person  |   | me Telephone Number  |
| Enclosed is a che-      | ck for the                                   | e following amount:                             |   |  |
| <b>■ \$25,00</b> Filing | g Fee  | ☐ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fec &<br>Certified Copy<br>(additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|                         | Address                                      | _   | Street Address:   | action   |
| _                       | ration S                                     | ection<br>orporations                           | Registration S<br>Division of Co  |  |
|                         | ox 6327                                      | •   | The Centre of   | •  |
| Tallaha                 | assee, F                                     | L 32314   | 2415 N. Monr  | oe Street, Suite 810   |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Yard Party LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

| The Huches of Organization for this Emiliar Elability  | y Company were filed on 11/05/2021              | and assigned                      |
|--|---|-----------------------------------|
| Florida document number L21000480033   | ·   |                                   |
| This amendment is submitted to amend the following:  | :   |                                   |
| A. If amending name, enter the new name of the li  | imited liability company here:                  |                                   |
| Gopher Greetings LLC   |   |                                   |
| The new name must be distinguishable and contain the words "L  | Limited Liability Company," the designation "Li | .C" or the abbreviation "L.L.C."  |
| Enter new principal offices address, if applicable:  |   |                                   |
| (Principal office address MUST BE A STREET ADD   | DRESS)  |                                   |
| Francisco de Compandado de Complicação de Complicaç |   |                                   |
| Enter new mailing address, if applicable:  | <del></del>                                     |                                   |
| (Mailing address MAY BE A POST OFFICE BOX)   | <del></del>                                     |                                   |
|  |   |                                   |
| B. If amending the registered agent and/or register agent and/or the new registered office address here  Name of New Registered Agent:   |   | er the name of the new registered |
| name of New Registered Agent:  |   | er the name of the new registered |
| agent and/or the new registered office address here  |   |                                   |
| name of New Registered Agent:  | e:<br>Enter Florida street addi                 | ess                               |
| name of New Registered Agent:  | e:<br>Enter Florida street addi                 |                                   |
| name of New Registered Agent:  | Enter Florida street addi                       | ess                               |

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

|              | Name of the state | Address Type of Action |          |
|--------------|---|------------------------|----------|
| <u>Title</u> | <u>Name</u>   |                        | □Add     |
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## Page 2 of 3

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| ctive date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the D | st be specific and cannot be pricock does not meet the appli | cable statutory filing re | (optional) than 90 days after filing.) equirements, this date | Pursuant to 605.02 will not be listed |
| ecord specifies a delayed<br>ne 90th day after the rec  | d effective date, but noord is filed.                        | ot an effective tim       | e, at 12:01 a.m. (  | on the earlier                        |
| February 8  | 2022   |                           |   |                                       |
|   | ,  | ·                         |   |                                       |
|   | Signature of a member or aut                                 | norized representative of | a member  |                                       |
| •   | Signature of a trientoar or date                             | <u>-</u>                  |   |                                       |