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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
CHBICT	Aquatic Ale	ex Illustration, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of.	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Alexandra Garcia		
			Name of Person	
		Aquatic Alex Illustration, l	J.C	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		6836 SW 83rd CT		
			Address	
		Miami, FL 33143		
			City/State and Zip Code	
		alex@aquaticalex.com	to be used for future annual report no	A: C
For further in	nformation co	oncerning this matter, please co		ancaton
Alexandra G	arcia		305 898-8837	
	Name of	f Person		me Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Address	_	Street Address: Registration S	ection
Div	vision of C	orporations	Division of Corporations	
□ \$25.00 F	Filing Fee Iling Address gistration S	\$30.00 Filing Fee & Certificate of Status Section orporations 7	Certified Copy (additional copy is enclosed) Street Address: Registration S Division of Co	Certificate of Status & Certified Copy (additional copy is enclose ection

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Aquatic Alex Illustration, LLC

2022 HAR 21 PM 2: 29

(Name of the Limited Clabifity Co. (A Florida Lim	ompany as it now appears on our re lited Liability Company)	TALLAMASSEE, FI
The Articles of Organization for this Limited Liability Comp. Florida document number L22000090860	pany were filed on January 31, 2	022 and assigned
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 I	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	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered off	fice address on our records, <u>er</u>	nter the name of the new registe
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ddress
	City	, FloridaZip Code
	Cuy	гір Соае

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 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>	Name	Address	Type of Action
MGR	Alexandra Garcia	6836 SW 83rd CT. Miami, FL 33143	■Add
			□Remove
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

-	
effecti te: If	date, if other than the date of filing:
ecord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted _	
	100000
	Signature of a member or authorized representative of a member
	Alexandra Garcia