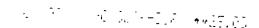
L22000160986

(Requestor's Name)
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COVER LETTER

TO:

	Registration Se Division of Cor			
eup ir c	ToddArt LI	LC .		
SUBJEC	1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Meg Gallo		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		The Gallo Group Inc		
		***	Firm/Company	
		1750 N University Dr. Sui	te 221	
			Address	
		Coral Springs FL 33071		
			City/State and Zip Code	
		meg@thegallogroup.net		
			to be used for future annual report no	otification)
For furthe	er information c	oncerning this matter, please c	all:	
Meg Gallo			954 547-1172 at()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	00 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)
	Mailing Addres Registration S		Street Address: Registration S	ection
	Division of C		Division of Co	
	P.O. Box 632	27	The Centre of	
•	Tallahassee, l	FL 32314	2415 N. Moni	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ToddArt LLC

(<u>Name of the Limited Liab</u> (A Flor	bility Company as it now appears on our record rida Limited Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability	• •	and assigned
Florida document number L22000160986	 ·	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
Scratch & Sniff LLC		
The new name must be distinguishable and contain the words "L	limited 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 AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registengent and/or the new registered office address here	red office address on our records, enter	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addres	SS
	, FI	orida
	City	Zip Code
New Registered Agent's Signature, if changing Registe	ered 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Add
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serted in this block	does not mee	et the applic	rable statutory	g or more than s filing require	option O days after firements, this c	ral) ling.) Pursuant to date will not be	o 605.0207 e listed as
lelayed effective da	ite, but not ar	n effective t	ime, at 12:01	a.m. on the ea	rlier of: (b)	The 90th day	after the
May 4	·	202.	_ .				
			- 				_
					iber		
d d	other than the daisted, the date must be inserted in this block we date on the Departure delayed effective daison.	other than the date of filing: isted, the date must be specific and conserted in this block does not me we date on the Department of Standelayed effective date, but not an experience of a me Signature of a me	other than the date of filing: isted, the date must be specific and cannot be prior isserted in this block does not meet the applicate date on the Department of State's records delayed effective date, but not an effective the state of t	other than the date of filing: isted, the date must be specific and cannot be prior to date of filing isserted in this block does not meet the applicable statutory we date on the Department of State's records. delayed effective date, but not an effective time, at 12:01	other than the date of filing: isted, the date must be specific and cannot be prior to date of filing or more than 9 ascrted in this block does not meet the applicable statutory filing require we date on the Department of State's records. delayed effective date, but not an effective time, at 12:01 a.m. on the early way 4 and 2007. Signature of a member or authorized representative of a mem	other than the date of filing:	isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to iscreted in this block does not meet the applicable statutory filing requirements, this date will not be see date on the Department of State's records. delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day Nay 4 2027 Signature of a member or authorized representative of a member

Filing Fee: \$25.00