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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			 	

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Help

New Registered Agent's Signature, if changing Registered Agent:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Linkilla, Comme	and as it now appears on our records )	<del></del>			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	Liability Company)				
The Articles of Organization for this Limited Liability Company  Florida document number L22000195998	were filed on	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	obreviation "L.L.C."			
Enter new principal offices address, if applicable:	2-47 Greene Street				
(Principal office address MUST BE A STREET ADDRESS)	New York, NY 10013				
Enter new mailing address, if applicable:	<u> </u>				
Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	ne of the new regis			
gent and/or the new registered office address here:	address on our records, enter the nam	ne of the new regis			
	address on our records, enter the nam	ne of the new regis			
agent and/or the new registered office address here:		ne of the new regis			
Name of New Registered Agent:	address on our records, enter the nam  Enter Florida street address Florida	ne of the new regis			

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	SHILLER, ZACHARY		
			<b>□</b> Remove
			Change
MGR	Brittany Kaplan	2-47 Greene Street	■Add
		New York, NY 10013	□Remove
			□Add
			□Remove
			□Change
			□Add
			Remove
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ffective date, if other than the dan effective date is listed, the date must ote: If the date inserted in this bloom	date of filing:  be specific and cannot be prior  ck does not meet the application  partment of State's records.	able statutory filing requ	(optional) n 90 days after filing.) Pursuant irements, this date will not	to 605.0207 be listed as
ocument's effective date on the Dep				
record specifies a delayed effective	date, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th da	iy after the
record specifies a delayed effective is filed.	7() 27	me, at 12:01 a.m. on the	earlier of: (b) The 90th da	y after the
record specifies a delayed effective lis filed.  ated May 31  /s/ Joseph Panholzer	2022			y after the
record specifies a delayed effective I is filed.  ated May 31  /s/ Joseph Panholzer	7() 27			y after the

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