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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEBER CREATIVE CUSTOMS, LLC

| Certificate of Status | 0       |
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| Certified Copy        | 0       |
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Weber Creative Customs, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/18/22 and assigned Florida document number <u>L22000232379</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Definitely Onto Something, LLC The new name must be distinguishable and contain the words "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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 , Florida City

## 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> | <u>Name</u> | <u>Address</u> | Type of Action |
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| Effective date, if other than the   | date of filing: (optional) be specific and cannot be prior to date of filing or more than 90 days after filing.) Pu  | 505.030            |
| If an effective date is listed, the date must<br>Note: If the date inserted in this blo | be specific and cannot be prior to date of filing or more than 90 days after filing.) Purck does not meet the applicable statutory filing requirements, this date will | I not be listed as |
| document's effective date on the De   | partment of State's records.   |                    |
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| ne record specifies a delayed effective   | date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90   | 0th day after the  |
| ord is filed.   |  |                    |
| 1   | 2022   |                    |
| Dated June 23   | 2022   |                    |
|   |  |                    |
|   | Signature of a member or authorized representative of a member   |                    |
|   | ingulative of a member of authorized representative of a member  |                    |
| Riley Park  |  |                    |
|   | Typed or printed name of signee  |                    |

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