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COVER LETTER

TO: Registration Section

Division of Co	rporations	•	* # .
SUBJECT: Purp	ose and Pink LLC		•
SUBJECT.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Alisha Alexis	
		Name of Person	
	Purpose	: And Pink LLC	
		Firm/Company	
		781 SE Lansdowne Ave	
		Address	
	Port	Saint Lucie, FL. 34983	
		City/State and Zip Code	
		a@GracefulExchange.co to be used for future annual report no	(fination)
For further information	concerning this matter, please c		(incation)
Alisha	Alexis	at (31	8-2597
	of Person	all 1	me Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee ■	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u> Registration		<u>Street Address:</u> Registration S	ection
Division of	Corporations	Division of Co The Centre of	•
P.O. Box 63 Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Purp	ose And Pink LLC	
(Name of the Limited Liability (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	4.49PA9
he Articles of Organization for this Limited Liability C	Company were filed on09/12/2022	and assigned
lorida document number L22000397173	.	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
Graceful Exchange LLC		
he new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
The many maintained offices address if annihilables		
inter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET ADDI</u>	<u> </u>	
		2
		17
inter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
Mailing address MAT BL AT (ST OFFICE BOX)		<u> </u>
	·	- R 430
		-
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the r</u>	name of the new registe
pent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
nen registered orner rightess.	Enter Florida street address	
	Florida	
	, Florida	Zip Code

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 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

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□ Remove
			□Change
			🗆 Add
			□Remove
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···			□Add
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			Change
			□Add
			□Remove
			□Channe

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				2012	-
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				A	프, A.S. 프로르
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f an effective date is Note: If the date	f other than the date of listed, the date must be specinserted in this block does ive date on the Department	cific and cannot be prior to di es not meet the applicable	ate of filing or more than 90 day statutory filing requiremen	(optional) s after filing.) Pursuant to 6 ts, this date will not be E	05.0207 sted as (
The 90th day	after the record is	filed.	n effective time, at 12		lier of:
Dated	July 4	2024			
	<u> </u>	ALW W fe of a member or authorize	d representative of a member		