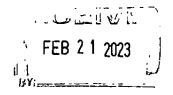
L22000529271

(Requestor's Name)
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R. HUNT O 2/22/23

COVER LETTER

TO: Registration S Division of Co			
PokemonJo	on LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	John Eynouf		600 000 100
		Name of Person	12 ES 22
		Firm/Company	PM 1: 32 PM 1: 32 PM 1: 32
	110 W Goodheart Ave	Address	
	Lake Mary, Fl 32746		
	pokemonjontv@gmail.com	City/State and Zip Code	
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notification all:	
John Eynouf		407 3120062	
Name o	of Person	Area Code Daytime Telep	hone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of C P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabil (A Florid	Ity Company as it now appears on our record la Limited Liability Company)	<u>(s.</u>)
The Articles of Organization for this Limited Liability (Florida document number L22000529271		and assigned
This amendment is submitted to amend the following:		PH 1:3
A. If amending name, enter the new name of the lim	nited liability company here:	33 定
ReadyUp Collectibles LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	RESS) 501 ford	ss way
(Principal office address MUST BE A STREET ADD	RESS) Santord	FL 32791
Enter new mailing address, if applicable: A A (Mailing address MAY BE A POST OFFICE BOX)	50 Sept. 0.	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		the name of the new registers
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	55
	. FI	orida
	City	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 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
Mar	Marc Maldonado	1356 Providence Bird	_ MAdd
J		Dutona, FZ 32725	_ 🗆 Remove
			_ Change
Mac	Ryan Holley	5297 Amalfi Dr.	_ DAdd
	ر ا	5297 Amalfi Dr. Canal winchester, OH 45	Z (1. Q _ □Remove
			_ Change
mer	Daniel Holley	1326 Graf St. Lancaster OH 43130	_ 🗹 Add
	J	Lancaster OH 43130	_ []Remove
		<u> </u>	_ □Change
MER	<u>Pedro Rangel Perill</u>	0 1208 NW 107th TER.	_ 🖸 Add
	·	Plantation, FL 33322	_ □Remove
			_ Change
			_ □Ādd
			_ □Remove →
		The second secon	123
			_ Change;
			_ ÖAdd
			□Remove
			_ Change

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25 PH 1: 3: FE	Fective date, if other than the date of filing: (optional)				
22 PH 1: 3: FE	Fective date, if other than the date of filing: (optional)				
22 PH 1: 3: FE	Fective date, if other than the date of filing: (optional)				
9 F. B 22 PH 1: 33	Fective date, if other than the date of filling: (optional)				
9 F. B 22 PH 1: 33	Fective date, if other than the date of filling: (optional)				
PH 1: 23	Fective date, if other than the date of filing: (optional)				7.3
22 PH 1: 2	Fective date, if other than the date of filing: (optional)				;
PH C	Fective date, if other than the date of filing: (optional)		<u> </u>		
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