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To:

Division of Corporations

Fax Number : (850)517-6383

From:

Account Name : ZENBUSINESS INC. Account Number : 120230000190 Phone : (044)449-3624 Fax Number : (512)507 0678

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 NOTARIZED BY DESTINY LLC

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18506176383 ARTICLES OF AMENDMENT

TO

ARTICLES OF ORGANIZATION **OF**

ALLAHASSECTELOPIO

Notarized by Destiny 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 2023-03-23. and assigned Florida document number 1.23000148449 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Tiny Tides Collective LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST RE 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

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.

City

if Changing Registered Agent, Signature of New Registered Agent

| | = Manager R = Authorized Member | | |
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| d specifies a delayed effecti led. | ve date, but not an effective time, at 12:01 a.m. on th | ne earlier of: (b) The 90th day after t |
| 1/15 | 2025 | |
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