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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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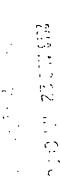
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COVER LETTER

TO:	Registration Se Division of Cor			•		
cus m		BROS, LLC				
SUBJE	CI:	Name of Lini	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please i	return all correspo	ndence concerning this matter	to the following:			
		Herbie Love				
			Name of Person			
			Firm Company			
		14790 N. Kendall Dr. ±961	094			
		Miami, FL 33196				
		City/State and Zip Code				
suncitypublishing@gmail.com E-mail address: (to be used for future annual report notification)						
For furt	her information o	oncerning this matter, please ca				
Herbie						
	Name o	t Person	Area Code Daytim	e Telephone Number		
Enclose	ed is a check for th	ne following amount:				
□ \$2 <i>:</i>	5.00 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)		

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRAFFITI BROS, 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 $\frac{05/03/2023}{2000}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GRAFFITI WRITING, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address N/A 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.

NA
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the fitle, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	□Add
			□ Remove
			□Change
N/A	N/A	N/A	□Add
			□Remove
			□Change
N/A	N/A	N/A	□Add
			□Remove
			□Change
N/A	N/A	N/A	
			□Remove
			□Change
N/A	N/A	N/A	□Add
			□Remove
			□Change
N/A	N/A 	N/A	□Add
			Remove
			□Change

Page 2 of 3

Amending the nam	e only (see Section	A.)				
GRAFFITI BROS.	LLC -to- GRAFFI	TI WRITING. LI	.C			
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Tective date, if other in effective date is listed, to te: If the date inserted cument's effective date	he date must be specif I in this block does	ic and cannot be pri not meet the appl	icable statutory fil	more than 90 days a		
record specifies a The 90th day after			not an effective	time, at 12:0	1 a.m. on the	earlier of:
ted August 18th		2023	(
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Filing Fee: \$25.00