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COVER LETTER

TO: Registration S Division of Co			
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SUBJECT: BIG GU	AVA PERFUME, LLC Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondence	ondence concerning this matter	r to the following:	
	Corpoi	rate Maintenance Le	ead
		Name of Person	
	Prod	essing Department	
		Firm/Company	
	·	1450 Vassar St	
		Address	, , , , , , , , , , , , , , , , , , ,
		Reno, NV 89502	
		City. State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	all:	
Process	ing Department	at (800) 638-2320	
Name of Person		Area Code Daytim	e Telephone Number
Enclosed is a check for th	e 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)

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG GUAVA PERFUME, 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 12/06/23 __ and assigned Florida document number <u>L23</u>000542031 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BIG GUAVA SCENTS, 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 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 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.

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

Title	Name	Address	Type of Action
			
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If	date, if other than the date of filing: N/A (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 's effective date on the Department of State's records.	605.0 list e c
cor 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea Ith day after the record is filed.	rlier
1	December 21st. 2023. Brenda Moore	
	Brends Movel Signature of a member or authorized representative of a member	
	-	
	Brenda Moore	

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Filing Fee: \$25.00