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(Red	questor's Name)	
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FILED 2024 APR 16 PH 5: 47

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	Tribute Cus	itoms LLC		
	-	Name of Lan	ited Lizbility Company	
The enclosed	l Articles of .	Amendment and fee(s) are sub	matted for filing	
Please return	all correspo	ndence concerning this matter	to the following.	
		Jason Bahineau		
			Name of Person	
		Tribute Customs LLC		
			Firm Company	
		467 Brown Bear Run		
			Address	······································
		Saint Johns, FL, 32259		
			City+State and Zip Code	
		bablneaubiz@gnsail.com		
		H-mail address: (I	to be used for fature annual report notifi	cation)
For further u	aformation e	oncerning this matter, please co	ali:	
Jason Bubin	Pàu		904 322-3159	
	Name of	l'Persim	Area Code Dayume	Telephone Number
Hawlosed is a	check for th	se following amount.		
□ \$25,00 F	Filing Fee	☐ \$30 (0) Filing Fee & Certificate of Status	S55 00 Filing Fee & Certified Copy (additional copy a enclosed)	■ \$60 00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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TO: Registration Section

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

FILED 2024 APR 16 PM 5: 47

Tribute Puzzles LLC

(Name of the Limited Liability Company as it now appears on our recripts): 14 (A Florida Limited Liability Company) [13] [14] [14] [15]

	141 (141)	Wister at 1980
The Articles of Organization for this Limited Liability (Company were filed on 01 Feb 2024	and assigned
Florida document number L24000058977		i e e
This amendment is submitted to amend the following:		
A. If umending name, enter the new name of the lim	nited liability company here:	
Tribute Customs LLC		
The new name must be distinguishable and contain the words "Lin	nited Lability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the	name of the new register
The state of the s		
Name of New Registered Agent:		
		
New Registered Office Address:	Enter Florida street address	
	, Florid	la
	~ ···	Mr. mar

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>	<u>Name</u>	Address	Type of Action
	 		
			□Remove
·			DClunge
		 	Dadd
			□Remove
			□ Change
			Daid
			□Remove
			□ Change
			DAdd
			□Remove
			DChange
			□Remove
		**************************************	DChange
			CIAdd
		 	1. Remove
			□ Change

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ited		•
Signature of a member or authorized representative of a member	•	Signature of a member or authorized representative of a member
Jason Babineau		Jason Babineau .

Filing Fee: \$25.00