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Fax 18134365206

Division of Corporations

<u>Florida</u> Department of State (shown below) on the top and bottom of all pages of the document.

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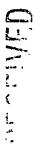
Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081

: (307)200-2803

Fax Number

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Flipside Projects LLC (Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on Jability Company)	our records.			
he Articles of Organization for this Limited Liability Company lorida document number £25000228433	were tiled on <u>05/14/2</u>	5	a	nd assi	gned
his amendment is submitted to amend the following:					
. If amending name, enter the new name of the limited liab	ility company here:				
he new name must be distinguishable and contain the words "Lunited Liabil	ity Company," the design	ation "LLC" or th	ne abbreviat	ion "L.1	C'."
nter new principal offices address, if applicable:				-20	
Principal office address MUST BE A STREET ADDRESS)			··	25 J	63.
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nter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE BOX)					سية
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. If amending the registered agent and/or registered office a gent and/or the new registered office address here:  Name of New Registered Agent:	iddress on our recor	ds, <u>enter the 1</u>	name of th	ie new	regist
New Registered Office Address:					
	Enter Florida x				
		Florida	l		
4-40-00-1-1-10-00-1-1-1-1-1-1-1-1-1-1-1-	Ciri				

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.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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12.95	Signature of a member or an					
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