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COVER LETTER

TO:	Registration Se Division of Cor			è				
MILLENNIUM RESOURCE ALTERNATIVES, LLC								
SUBJE	Name of Limited Liability Company							
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please r	eturn all correspo	ondence concerning this matter	to the following:					
		DONALD R. TESCHER,	ESQ.					
			Name of Person					
		ES, P.A.						
Firm/Company								
		925 SOUTH FEDERAL H	IIGHWAY, SUITE 500					
			Address	· · · · · · · · · · · · · · · · · · ·				
		BOCA RATON, FLORID	A 33432					
			City/State and Zip Code	 				
		DTESCHER@TESCHERL	.AW.COM					
		E-mail address: (to be used for future annual report noti	fication)				
For furt	her information c	oncerning this matter, please ca	all:					
DONALD R. TESCHER		561 997-7008 at ()						
	Name o	f Person		e Telephone Number				
Enclose	d is a check for th	ne 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)				
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on rations				

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MILLENNIUM RESOURCE ALTERNATIVES, 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 August 19, 2002 and assigned Florida document number L02000021067 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 inc ofethe new registered agent and/or the new registered office address here: 곺 Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida 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.

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>	<u>Address</u>	Type of Action
MGR	JAMES S. KALLMAN	341 MONROE ST	
		HOLLYWOOD, FL 33019	Remove
			Change
MGR	DEWI SURYATI LIAUW	MARCCUS BUILDING	_ ■ Add
		MAJAPAHIT No. 10	□ Remove
		JAKARTA PUSAT 10160	□ Change
			
			□ Remove
			Ghange
			AHASSEE G BeRemoves
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more t	(optional)	
te: If the date inserted in this block does not meet the applicable statutory filing re-		
rument's effective date on the Department of State's records.		
record aposition a delayed affective data but not an affective time.		منامد
record specifies a delayed effective date, but not an effective time he 90th day after the record is filed.	e, at 12:01 a.m. on the ea	arne
ed October 16, 2015.		
Jon 16m		
Signature of a member or authorized representative of a	member	_

Page 3 of 3

Filing Fee: \$25.00