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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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TALLAHASSEE, FLORIDA

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AREAS USA ATLANTA, LLC

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9/25/08
SST

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Areas USA Atlanta, 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 03/18/2008 and assigned
Florida document number L08000027878

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 end with 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 name of the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

Florida

(City)

(Zip Code)

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	AREAS USA, INC.	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☐ Add ☐ Remove
MGR	RABELL, XAVIER	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☐ Add ☐ Remove
CEO	RABELL, XAVIER	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☐ Add ☐ Remove
VP	URIBE, EDUARDO	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☐ Add ☐ Remove
VP	BALLI, FRANCESCO	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☐ Add ☐ Remove
VP	FLAHERTY, DAVID	5301 BLUE LAGOON DRIVE SUITE 690 MIAMI FL 33126	☒ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____

Signature of a member or authorized representative of a member

Eduardo Uribe

Typed or printed name of signee

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Filing Fee: \$25.00

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