

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L12000003702

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

From: Account Name : FASTKIT CORP
 Account Number : 120100000009
 Phone : (305) 599-0839
 Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 STORAX, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2016 JUN 15 PM 4:33
 2016 JUN 15 A 11:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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JUN 17 2015
 BRUCE

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

STORAX, LLC

~~Company of the Limited Liability Company of a non-alien entity on the records
of the State of Florida, Company~~

The Articles of Organization for this Limited Liability Company were filed on 01/09/2012 and amended

Florida document number L12000003702.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the Limited Liability Company here:

N/A

~~The new name must be distinguishable and comply with the name "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."~~

Enter new principal office address, if applicable:

N/A

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

N/A

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:

New Registered Agent:

N/A

New Registered Office Address:

None 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 relating 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 affirm that the (limited liability) company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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If any existing Authorized Person(s) authorized to manage, enter Cr. No., status, 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>	<u>Type of Action</u>
MGR	Diaz, Martin	2600 S. Douglas Rd.	<input type="checkbox"/> Add
		STE. 501	<input checked="" type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Daniel Steiner	2600 S. Douglas Rd.	<input checked="" type="checkbox"/> Add
		STE. 501	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

w/a

E. Effective date, if other than the date of filing: _____ (Signature)
(If an effective 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 (F.S. 217.03(4)).
Note: If the date recorded in this block does not meet the applicable regulatory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
(a) The 90th day after the record is filed.

Dated: JUNE 8th 2016

X _____
(Signature of a person or authorized representative of a business)
WALTER MARTIN RIVER
(Print or printed name of signer)

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2018 JUN 15 A 11: 05
SUPREMACY OF STATE
TALLAHASSEE, FLORIDA