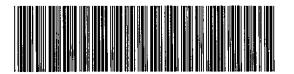
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<u>-</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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G. HARVEY
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor	ction porations				
	OLDINGS LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	GRATSIANI, GIDEON N	ИG			
		Name of Person			
	YH SOL HOLDINGS LL	C			
		Firm/Company			
	P O BOX 820				
		Address			
	HALLANDALE, FL 330	80			
		City/State and Zip Code	-		
	DA@FST26.COM			2018	
	E-mail address: (to be used for future annual report notificati	on)		H2-17
For further information co	oncerning this matter, please c	all:		2015 HAY 28	1-24-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4
DANIEL ARKUSH		954 393-1151 at ()		SEE THE	<u> </u>
Name of Enclosed is a check for the	f Person	Area Code Daytime Tel	lephone Number	STATE FLOREDA	
	-		-		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YH SOL HOLDINGS 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 06/26/2014 and assigned Florida document number _____14000102194 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 "LLC." 975 NORTH MIAMI BEACH BLVD #234 Enter new principal offices address, if applicable: NORTH MIAMI BEACH, FL 33162 (Principal office address MUST BE A STREET ADDRESS) P O BOX 820 Enter new mailing address, if applicable: HALLANDALE, FL 33008 (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: 975 NORTH MIAMI BEACH BLVD #234 New Registered Office Address: Enter Florida street address Florida 33162 NORTH MIAMI BEACH

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.

City

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 = Ma $AMBR = Au$	anager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			☐ Change
			□ Remove
			☐ Change
		• • • • • • • • • • • • • • • • • • • •	□ Remove
			Change Add Add Remove From Part Change
			Remove Remove PROPERTY Contraction Contrac
			□ Remove
			Change
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			Remove
			Change

				
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	st be specific and cannot be prior to d lock does not meet the applicable		days after filing.) Pursu	ant to 605.02
record specifies a delaye The 90th day after the re	d effective date, but not a cord is filed.	n effective time, at	12:01 a.m. on th	ne earlier
MAY 19	2015			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00