

L1500076431

Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : PAUL SALVER, P.A.
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FERVAL GROUP, LLC

Table with 2 columns: Item and Value. Rows include Certificate of Status (1), Certified Copy (0), Page Count (03), and Estimated Charge (\$30.00).

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DIVISION OF CORPORATIONS
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FERYAL GROUP, 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 4/30/15 and assigned Florida document number L1500076431

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: 2625 EXECUTIVE PARK DRIVE SUITE 5 WESTON, FL 33331

Enter new mailing address, if applicable: 2625 EXECUTIVE PARK DRIVE SUITE 5 WESTON, FL 33331

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: SALVER & COOK, LLP
New Registered Office Address: 2721 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, Florida 33331

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.

[Handwritten signature]
If Changing Registered Agent, Signature of New Registered Agent

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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

| Title | Name  | Address | Type of Action                  |
|-------|-------|---------|---------------------------------|
| _____ | _____ | _____   | <input type="checkbox"/> Add    |
| _____ | _____ | _____   | <input type="checkbox"/> Remove |
| _____ | _____ | _____   | <input type="checkbox"/> Change |
| _____ | _____ | _____   | <input type="checkbox"/> Add    |
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| _____ | _____ | _____   | <input type="checkbox"/> Change |

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

FEDERAL ID NUMBER IS: 37-1783390

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory 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:  
(b) The 90th day after the record is filed.

Dated  JUN/07/2015

\_\_\_\_\_  
Signature of a member or authorized representative of a member

MANUEL N. DA SILVA P.  
Typed or printed name of signer

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