

Division of Corporations

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L16000103491
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : FOWLER WHITE BURNETT P.A.
Account Number : 071250001512
Phone : (305) 789-9200
Fax Number : (786) 437-4609

2017 DEC 11 AM 12:30

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

Email Address: lross@fowler-white.com

2017 DEC 11 AM 12:30

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LIFE IS A HIGHWAY, LLC

Certificate of Status	0
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DEC 12 2017
J. HARRIS

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Corporate Filing Menu

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Life is a Highway, 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 05/26/2016 and assigned
Florida document number L16000103491

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:

1395 Brickell Avenue, 14th Floor

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida 33131

Enter new mailing address, if applicable:

1395 Brickell Avenue, 14th Floor

(Mailing address MAY BE A POST OFFICE BOX)

Miami, Florida 33131

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: Laura Ross

New Registered Office Address: 1395 Brickell Avenue, 14th Floor
Enter Florida street address

Miami, Florida 33131
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 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

CE /
IA

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO/VP	Darlene Frisina	14318 Blackberry Drive	<input checked="" type="checkbox"/> Add
		Wellington, Florida 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO/VP	Lynda Benjamin	14318 Blackberry Drive	<input checked="" type="checkbox"/> Add
		Wellington, Florida 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
S	Mark Sanchez	1140 University Blvd 23	<input checked="" type="checkbox"/> Add
		Jupiter, Florida 33458	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	DESIREE M MUFSON	919 N. DIXIE HWY	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

