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SECRETARY OF STATE

JUN 02 2016 S. YOUNG

## **COVER LETTER**

| то:      | Registration Se<br>Division of Co |  |   |                             |  |
|----------|-----------------------------------|--|---|-----------------------------|--|
| SUBJE    |                                   | lobal Holding LLC  |   |                             |  |
| SUBJE    | .C1:                              | Name of Lin  | nited Liability Company   |                             |  |
| The end  | closed Articles of                | Amendment and fee(s) are sub   | omitted for filing.   |                             |  |
| Please   | return all correspo               | ondence concerning this matter   | to the following:   |                             |  |
|          |                                   | Romy B. Jurado   |   |                             |  |
|          |                                   | <del></del> :  | Name of Person  |                             | 00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed) |
|          |                                   | Jurado & Farshchian, P.L.  |   |                             | တ<br><u>ဘ</u>  |
|          |                                   | *  | Firm/Company  |                             | - <u></u>  |
|          |                                   | 12955 Biscayne Boulevard   | d, Suite 328  |                             |  |
|          |                                   |  | · Address   |                             | - =  |
|          |                                   | North Miami, FL 33181  |   |                             | •  |
|          |                                   |  | City/State and Zip Code   |                             | -  |
|          |                                   | romy@jflawfirm.com   |   |                             |  |
|          |                                   | E-mail address: (  | to be used for future annual re                                 | port notification)          |  |
| For furt | her information o                 | concerning this matter, please c   | all:  |                             |  |
| Romy l   | B. Jurado                         |  |   | 0440                        |  |
|          | Name o                            | of Person  | at ()<br>Area Code  | Daytime Telephone Numbe     | т  |
| Enclose  | ed is a check for t               | he following amount:   |   |                             |  |
| \$25     | 6.00 Filing Fee                   | □ \$30.00 Filing Fee & Certificate of Status                                       | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo | Certifica<br>sed) Certified | ite of Status &  <br>  Copy  |
|          | Regist<br>Divisio<br>P.O. B       | ING ADDRESS:<br>ration Section<br>on of Corporations<br>ox 6327<br>assee, FL 32314 | Registratio<br>Division of<br>Clifton Bu                        | f Corporations              |  |

Tallahassee, FL 32301

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

| Entropy Global Holding LLC  |   |                        |
|---|---|------------------------|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited  | ny as it now appears on our records.)<br>Liability Company) |                        |
| The Articles of Organization for this Limited Liability Company   | were filed on April 29th, 2016                              | and assigned           |
| Florida document number L16000085177  |   |                        |
| This amendment is submitted to amend the following:   |   |                        |
| A. If amending name, enter the new name of the limited liab   | ility company here:   |                        |
| The new name must be distinguishable and contain the words "Limited Liabi   | lity Company," the designation "LLC" or the                 | abbreviation "LL.C."   |
| Enter new principal offices address, if applicable:   |   | <b>芸</b> [2]           |
| (Principal office address MUST BE A STREET ADDRESS)   | 7980 Hawthorne Avenue                                       | is seen                |
|   | Miami Beach, FL 33141                                       |                        |
|   |   | = 1                    |
| Enter new mailing address, if applicable:   |   | 9 0                    |
| (Mailing address MAY BE A POST OFFICE BOX)  | 7980 Hawthorne Avenue                                       |                        |
|   | Miami, FL 33141   |                        |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | ffice address on our records, <u>enta</u><br><u>e</u> :     | er the name of the new |
| 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 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

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>           | <u>Address</u>            | Type of Action |
|--------------|-----------------------|---------------------------|----------------|
| AMBR         | Mihai-Gabriel Popescu | 7980 Hawthorne Avenue     |                |
|              |                       | Miami Beach, FL 33141     | □ Remove       |
|              |                       | <del> </del>              | ■ Change       |
| AMBR         | Dan-Paul Medrea       | Str. Zagazului 13-19      |                |
|              |                       | Bucharest, Romania 014261 | Remove         |
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| fective da     | ite, if other t     | han the dat      | e of filing  | ·•           |              |              |               | (optio         | nal)           |   |
| in effective o | date is listed, the | e date must be s | specific and | cannot be pr | rior to date | of filing or | more than 9   | 0 days after t | iling.) Pursua | nt to 605.020                               |
|                | date inserted i     |                  |              |              |              | atutory fili | ng require    | ments, this    | date will no   | t be listed a                               |
|                |                     |                  |              |              |              |              |               |                |                |   |
| record s       | specifies a d       | delayed ef       | fective d    | ate, but     | not an e     | effective    | time, at      | 12:01 a        | .m. on the     | e earlier :                                 |
| The 90th       | day after t         | the record       | is filed.    |              |              |              | •             |                |                |   |
|                | 10                  | 0.1              |              | 0.           | _            |              |               |                |                |   |
| ated           | May                 | 29               | ,            | 201          | <u>6</u> .   |              |               |                |                |   |
|                | •                   |                  | h            | 1            |              |              |               |                |                |   |
|                |                     |                  | 7/           |              |              |              |               |                |                |   |
| _              |                     | Sian             | 1/2          | nember or a  | uthorizod a  |              |               | L              | -              |   |

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