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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NEW START BUSINESS SOLUTIONS INC

Account Number: I20130000079

: (305)804-1047

Fax Number

: (866)767-7835

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 S & S OF FLORIDA, L.L.C.

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BRUCE



From: Hector Rodriguez

Fax: (866) 767-7835

To: Sunbiz LLC

Fax: +1 (850) 6176383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S & S OF FLORIDA, L.L.C.		
(Name of the Limited Liubility (A Florida	y Company as it now appears on our re Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 04/29/2002	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		Tania
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addr	tered office address on our rec ress here:	cords enter the name of the r
	•	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	ਰੂਨ ਯ
	Lines i no neu street u	
·	City	, Florida
	~··· <i>y</i>	-7

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

From: Hector Rodriguez Fax: (866) 767-7835

To: Sunbiz LLC

Fax: +1 (850) 6176383

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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 (((H16000164498 3)))

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MARIA PRIOS	8590 SW 8TH ST	■ Add
		MIAMI, FL 33144	☐ Remove
			[] Change
			Add
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			Add
			□ Remove
			∏ Change

	Fax: (866) 767-7835	To: Sunbiz LLC	Fax: +1 (850) 6176383	Page 4 of 4 07/07/	2016 8:04 PM (((H16000164498
D. If amendi	ng any other inforn	nation, enter change(s) here:	(Attach additional shee	ets, if necessary.)	
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