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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: COMITER & SINGER, LLP

Account Number: 120000000085

: (561)626-4742

Fax Number

: (561)626-4742

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BRISKIN HOLDINGS, LLC**

| Certificate of Status | Ţ. | 0 |
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| Certified Copy | | Ò |
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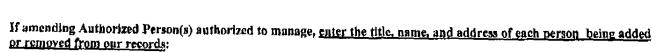
ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Briskin Holdings, LLC | , sie | |
|--|--|--------------------------|
| (Name of the Limited Liability Co (A Florida Lim | ompany as it now appears on our records.) | |
| The Articles of Organization for this Limited Liability Comp | oany were filed on 03/30/2004 | and assigned |
| Florida document number L04000023828 | | |
| 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 I | Liability Company," the designation "LLC" or the | ne abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| <u> Principal office address MUST BE A STREET ADDRES.</u> | (2) | |
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| 9.4 | | 3 |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | | |
| | 13 | |
| B. If amending the registered agent and/or registere registered agent and/or the new registered office address | | ter the name of the nev |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | 7:01 |
| | 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



MGR = Manager AMBR = Authorized Member

. J9 FAX

| Title | Name | Address | Type of Action |
|-------|--------------------------|--|----------------|
| MGRM | The Briskin Family Trust | 210 Jupiter Lakes Blvd., Stc. 3205 | |
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| Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this ble document's effective date on the De | ne specific and cambot back does not meet the a | e prior to date of t applicable statut | nnië or mole mini an | (optional) days after filing.) Pursuant nents, this date will not b | to 605.0207 (3)(0 be listed as the | b) |
| the record specifies a delayed) The 90th day after the reco | effective date, bu ord is filed. | ut not an effe | ective time, at | 12:01 a.m. on the | earlier of: | |
| 1. 2. | 2017 | | | | | |
| Dated May 24 | /. | market 1 | | | | |
| | Signature of a member o | r authorized repre | sentative of a memb | cr | | |

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