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To:

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

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KROME GOLD RANCHES MANAGEMENT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

FILED
 2015 APR 30 AM 11:31
 DEPARTMENT OF STATE
 TALLAHASSEE FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KROME GOLD RANCHES MANAGEMENT, 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 October 12, 2005 and assigned Florida document number L05000100650.

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:

(Principal office address MUST BE A STREET ADDRESS)

3900 N.W. 79th Avenue

Suite 567

Doral, Florida 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3900 N.W. 79th Avenue

Suite 567

Doral, Florida 33166

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:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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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>
MGR	Armando J. Guerra	1390 South Dixie Highway	☐ Add
		Suite 1200	☒ Remove
		Coral Gables, Florida 33146	☐ Change
MGR	Rodney Barreto	1390 South Dixie Highway	☐ Add
		Suite 1200	☒ Remove
		Coral Gables, Florida 33146	☐ Change
MGR	Frank Siberio	3900 N.W. 79th Avenue	☒ Add
		Suite 367	☐ Remove
		Doral, Florida 33166	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: April 29, 2015 (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.

(b) The 90th day after the record is filed.

Dated April 29, 2015

Signature of a member or authorized representative of a member

Frank Siberlo, Manager

Typed or printed name of signee

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Filing Fee: \$25.00

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ORIDA

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