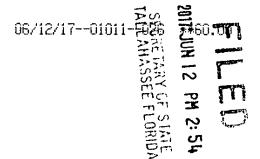
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Office Use Only



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I. HARRIS

~ COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT 3208 Flague LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kevin Mayott Name of Person
Firm/Company
3208 Fleerer Au.
Ceywest F1-33000
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kevin Achott at (305) 294-0831 Name of Person at (305) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Solonomial Solution} \text{Solonomial Solution} \text{Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3208 - Lacre L	Liability Company as it now appears on our records)
(A)	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi	ility Company were filed on 2 13 07 and assigned
Florida document number L0700014	.797 .
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(IDDRESS)
	SSE ZY
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
-	, Florida City Zip Code
	сиу гар Соне

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Yvette Mira-TALBOTT	3203 Flagler Aug Keywest, Fl. 3309	<u>→</u> ★Add
		Keywest, Fl. 330	D □ Remove
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E.C.	
If an ef	tive date, if other than the date of filing:
	nent's effective date on the Department of State's records.
he re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e90th day after the record is filed.
	— · · · · · · · · · · · · · · · · · · ·
Dated	JOHL , 2017.
	* I helde mira - Dellatt,
	Signature of a member or authorized representative of a member
	x Yuethe Mini-TACBOTT; Kevin E. Talbott

Page 3 of 3

Filing Fee: \$25.00