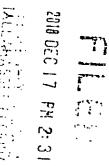
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## **COVER LETTER**

Div	ision of Cor	porations				
SUBJECT:	MORGRA	N HOLDINGS, LLC				
SOBJECT.						
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		DANIEL S. THALL				
		201 S. ORANGE AVENUE	, SUITE 1090			
	<del></del>					
		2018 C	-			
		12 (12) 12 (12) 14 (12)	F"			
		E-mail address: (	to be used for future annual report notif	ication)	PM	, , , , , , , , , , , , , , , , , , ,
For further i	nformation c	concerning this matter, please co	all:		~ · · · <b>&gt;</b>	
DANIEL S.	THALL		407 270-9270		$\frac{1}{2}\left( \frac{\omega}{2} \right)$	
	Name o	of Person		Telephone Number	-	
Enclosed is:	a check for th	he following amount:				
\$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

TO:

Registration Section

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

MORGRAN HOLDINGS, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp.  Florida document number		and assigned
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	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	•	er the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	018 CC
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	

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, name, and address of each person\_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
D	VIKTOR MAISTER	c/o Morgran Holdings, LLC 201 S. Orange Ave,1090,Orlando, FL 32801	Add
			🗆 Remove
			Change
			Add
			□ Remove
			Change
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			☐ Change

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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to dote:  If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	e statutory filing requirements, this date will not be liste
e record specifies a delayed effective date, but not a The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earlie
December 13 2016	
	ed representative of a member
Signature of a member or authoriza	<b>-</b>

Page 3 of 3

Filing Fee: \$25.00