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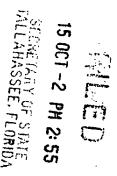
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KAINOS Products 110 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:
Felix Fidelibus Name of Person
Kainos Products, LLC Firm/Company
200 Park Central Blud. S, #5
Pompano Beach, FL 33064
Felix @ CTCApital ADVISORS - COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Felix Fidelibus at (954) 975-3143 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: 2 \$25.00 Filing Fee

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

(Name of the Limited Liability Compa (A Florida Limited)	cts LLC ny as it dow appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number LO 800012470.	were filed on 02/04/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	N(A
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	200 Park Central Blub 5. #5 POMPANO BEACH, FL 33064
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: New Registered Office Address:	NA AHASSEE
	Enter Florida street address , Florida City

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 = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add Remoderate PM 2:55 ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

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Filing Fee: \$25.00