PAGE 01/04 Page 1 of 1

Florida Department of State Division of Corporations

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## ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION

SECRETARY OF STATE **FALLAH**ASSEE FLORIDA

Name of the Limited Liability Comp	APTTAL LLC
The Articles of Organization for this Limited Liability Company Florida document number 40800049185	y were filed on 5/16/08 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and end with the words "Lin" "L.L.C."  Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	350 Canuno Granders Black Svik 106 Born Radan I W 33498
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	350 Camuno gardiaus Blyd switch Born Ratin of 33498
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address here	
A 1	• •

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

Registered Agent, Signature of New Registered Agent)

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 diffies, and I am familiar with and accept the obligations of my position as registered agent as provided for in Schaffler 608, F.S. Or, if this document is y confirm that the limited liability heing filed to merely reflect a change in the registered office and company has been notified in writing of this change

Page 1 of 2

MGR = Manager

01

## H08000185988 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM - Managing Member Title Type of Action Address Ennifer Komaro ☐ Add ☐ Remove \_ Add Removo Add Remove ☐ Add Remove [☐ Add Remove □ ∧dd 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

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H08000185988 3