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		COVER LETTER	
TO: Registration Division of (i Section Corporations		
SUBJECT:		SOURCES, LLC	
		nieg Praniutà Combailà	
The enclosed Articles	of Amendment and fee(s) are su	ıbmitted for filing.	
Please return all corre	spondence concerning this matte	er to the following:	
		Paul B. Steinberg	
		Name of Person	
	Ste	inberg & Associates, P.A.	
		Firm/Company	
	70	67 Arthur Godfrey Road	*** 1
		Address	ALL SEC
	Ν	liami Beach, FL 33140	A SEP LAHA
		City/State and Zip Code	
		to be used for future annual report notification)	PROVEN AND FILED SSEELED
For further informatio	n concerning this matter, please		Giran (C)
	David Stainhann	500 0044	
	Paul Steinberg	at (<u>305</u>) 538-2344 Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified (of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USD RESOURCES, LLC (Name of the Linuited 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 $04 \ 20 \ 200 \ and$ assigned Florida document number 10000038061.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, il applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	CR SE	
		Ar
	SSR T	
Enter new mailing address, if applicable:		m Z C
(Mailing address MAY BE A POST OFFICE BOX)		
		ç

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 608, 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

Page 1 of 2

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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:

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MGR = Manager MGRM = Managing Member

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<u>Title</u>	Name	Address	Type of Action
CEO	Giuseppe Guidice	767 Arthur Godfrey Road Miami Beach_EL 33140	Add Z Remove
<u>P</u>	Giuseppe Guidice	767 Arthur Godfrey Road Miami Beach, FL 33140	Add Remove
<u>CEO</u>	Fatima Panah	767 Arthur Godfrey Road Miami Beach, FL 33140	Add Remove
<u>P</u> _	Fatima Panah	Z67 Arthur Godfrey Road Miami Beach, FL 33140	Add Remove
			Add Remove
	<u></u>		Add Remove
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	APPROVED FILED 12 SEP 14 MH 8: 36 SECREDARY OF STATE TALLAHASSEEL LINES
	PAUL 5TE Typed or Fili	authorized representative of a member y") BEAG printed name of signee Page 2 of 2 ng Fee: \$25.00	
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