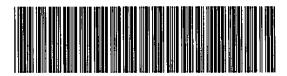
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COVER LETTER

то:	Registration Se Division of Cor		
CUD	MOFEMA	NI LLC	
SUB	JECT:	Name of Limited Liability Company	
The e	enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Pleas	e return all correspo	ondence concerning this matter to the following:	
		Diego J. Sirulnik	
		Name of Person	
		Law Offices of Alex D. Sirulnik, P.A.	Daytime Telephone Number \$60.00 Filing Fee, Certificate of Status &
		Firm/Company	
		2199 Ponce de Leon Blvd., Suite 301	
	1	Address	
		Coral Gables, Florida 33134	
		City/State and Zip Code	
		djs@sirulniklaw.com	
		E-mail address: (to be used for future annual report notification)	
For fu	urther information co	concerning this matter, please call:	
Dieg	o J. Sirulnik	305 443-7211 at ()	
	Name o	at () of Person Area Code Daytime Telephone Number	
Enclo	sed is a check for th	he following amount:	
■ \$:	25.00 Filing Fee	Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy	tus &

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

MOFEMANI LLC			
(Name of the Limi	ted Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records,) any)	
The Articles of Organization for this Limited L		n June 2, 2009 a	nd assigned
Florida document number L09000053502	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability compar	ny here:	
		4)	<u> </u>
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviat	
Enter new principal offices address, if appli	cable:		皇皇一
(Principal office address MUST BE A STRE)	ET ADDRESS)		77 -0
ı	Y	1	2: 02
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u></u>		
			6.41
B. If amending the registered agent and registered agent and/or the new registered of	· · · · · · · · · · · · · · · · · · ·	s on our records, enter the n	ame of the new
Name of New Registered Agent:	Alex D. Sirulnik, P.A.		
New Registered Office Address:	2199 Ponce de Leon Blvd., S	Suite 301	
	Ente	r Florida street address	
	Coral Gables	, Florida ³³¹³⁴	
	City	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 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
MGR	Oscar Rodolfo Stefani	2380 SW 80 Ct	☐ Add
		Miami FL 33155	■ Remove
			Change
MGR	Maria Fernanda Martinez	2380 SW 80 Ct	Add
		Miami, FL 33155	■ Remove
			□ Change
MGR	María Guadalupe Fernández	2199 Ponce de Leon Blvd.	_ · _ ■ Add
		Suite 301	□ Remove
		Coral Gables, FL 33134	Change
			☐ Add
			Remove
			Change
			Remove
			☐ Change
			□ Add
·			□ Remove
			☐ Change

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ffective date, if other the an effective date is listed, the d	an the date of filing	g:	ate of filing or more th	optional)) Pursuant to 605.0	1207
lote: If the date inserted in ocument's effective date or	this block does not n	neet the applicable	statutory filing req	uirements, this date	will not be listed	last
e record specifies a de The 90th day after th			n effective time,	at 12:01 a.m.	on the earlier	r of
December 7		2016				
			7			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00