

Florida Department of State  
Division of Corporations  
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# **L09000104301**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PHI GROUP LLC

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K. SALY  
EXAMINER  
JUN 10 2014

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41400013340

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

PHI Group LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

FILED  
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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on October 29, 2009 and assigned  
Florida document number L00000104301

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 office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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's 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 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

414000133404

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

MGR = Manager  
 AMGR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jean Bernard Lemire	2275 Biscayne Blvd. Suite 2 Miami, FL 33137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Maria Martha Lemire	2275 Biscayne Blvd. Suite 2 Miami, FL 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Michel Laphitzondo	2275 Biscayne Blvd. Suite 2 Miami, FL 33137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Marcela Laphitzondo	2275 Biscayne Blvd. Suite 2 Miami, FL 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State.)

Dated May 22, 2014

*Marcela Laphitz Zondo*  
Signature of a member or authorized representative of a member  
Marcela Laphitz Zondo  
Typed or printed name of signor