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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone #	<u>s)</u> ,
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

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Why of the

COVER LETTER

TO:	Registration Sec Division of Corp					
OHDIO		NATIONAL LLC				
SUBJE	Name of Limited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspon	ndence concerning this matter	to the following:			
		DANY ABRAHAM				
			Name of Person	_		
		KSDT & COMPANY				
	Firm/Company			· · · · · · · · · · · · · · · · · · ·		
		9300 S DADELAND BLV	'D SUITE 600			
		•	Address	_		
		MIAMI, FL, 33156		••	20 2	
		DABRAHAM@KSDT-CP.	City/State and Zip Code A.COM		2015 HAY	ii K
		E-mail address: (to be used for future annual report noti-	fication)	12 1888 1888	<u>ٺ</u>
For furt	her information co	oncerning this matter, please o	all:			4
JONAT	THAN KUSHNER		305 670-3370		STAT)
	Name of	f Person		e Telephone Number	<u> </u>	
Enclose	ed is a check for th	e following amount:				
\$25	i.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

4CI-INTERNATIONAL LLC (Name of the Limited 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 $\frac{01/04/2010}{1}$ and assigned Florida document number $\frac{L10000000568}{L10000000568}$ 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 9300 S DADELAND BLVD SUITE 600 Enter new principal offices address, if applicable: MIAMI, FL, 33156 (Principal office address MUST BE A STREET ADDRESS) 9300 S DADELAND BLVD SUITE 600 Enter new mailing address, if applicable: MIAMI, FL, 33156 (Mailing address MAY BE A POST OFFICE BOX) S 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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 = M AMBR = A	л Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
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## AVRAHAM SOLOMON, MGR	<u>, </u>				
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Filing Fee: \$25.00