

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GONZALEZ & COMPANY, C.P.A., P.A.
Account Number : I20110000074
Phone : (786) 272-5843
Fax Number : (305) 461-1096

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTERNATIONAL DESIGN FUSION, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

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EXAMINER

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INTERNATIONAL DESIGN FUSION, 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 February 10, 2010 and assigned
Florida document number L10000015709

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 "LLC."

Enter new principal offices 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**)

P.O. BOX 450839

MIAMI, FLORIDA 33245

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:

GONZALEZ & COMPANY, C.P.A., P.A.

New Registered Office Address:

804 S. DOUGLAS ROAD, SUITE 373

Enter 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 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

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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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Clarisa Fernandez	1201 SW 17th Terrace	<input type="checkbox"/> Add
		MIAMI, FL 33145	<input checked="" type="checkbox"/> Remove
MGR	MARISOL CREED	P.O. BOX 450839	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33245	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 15, 2012

Signature of a member or authorized representative of a member

Jorge Gonzalez, CPA
Typed or printed name of signer

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