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fing Cover Sheet

(((H180003014873)))



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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305) 374-7580

: (305)351-2122 Fax Number

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

vva@bilzin.com Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NORTH CENTRAL FUNDS LLC

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10/17/2018

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(((H18000301487 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NORTH CENTRAL FUNDS LLC	•
(Name of the Lim	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
	(A Flories Limited Liability Company)	·
The Articles of Organization for this Limited I	iability Company were filed on 03/0	01/2010 and assigned
T 1000002225		
Florida document number L10000022925	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :
The new came unist be distinguishable and contain the	words "Limited Lizbility Company," the des	ignation "LLC" or the abbreviation "LLC."
•		
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
	·	ج.
Enter new mailing address, if applicable:		2 2
(Mailing address MAY BE A POST OFFICE	(BOX)	- C 0
		27 0
7	Nowistand office address on	our records enter the figure of the us
B. If amending the registered agent and registered agent and/or the new registered of		our rectrict, enter the many or an
registered agent anniver the new registered to	THE MILES HETE.	This is
		72 %
Name of New Registered Agent:	JTC Miami Corporation	
New Registered Office Address:	1001 Brickell Bay Drive Suite 1706	
NEW VEKINGTON OTHER VIOLES	Enter Florid	la street address
	Miami	, Florida 33131
	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

Page 1 of 3

(((H18000301487 3)))

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>	Address	Type of Action
MGR	JTC Trustees (USA) Ltd.	140 North Phillips Ave. Suite 301	A dd
		Sioux Falls, SD 57104	☐ Remove
			☐ Change
MGR	AMICORP MANAGEMENT LIM	MARCY BUILDING, 2ND FLOO	□ Add
		PO BOX 2416	₩ Remove
	•	ROAD TOWN VG	Change
			□ Add
			☐ Remove
			Change
			SIGN T
			ARY BOARS
			TEN S
			C Remove
			Change
			□ Add
			C Remove
			☐ Change

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		nure of a memor	er or authoriz	zed rep	resentative	of a member	<u>(C</u>			
ord specifies 90th day afte Occober 15	e delayed effor the record i	s filed.		an eff	fective ti	me, at 1	2:01 a	.m. on	the ear	lier of
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ve date, if othe	r than the date	of filing: _			· m:	4. ~ 1	(optio	nal)	-	ሳፋ ሰ ታ ስን
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