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B. BOSTICK

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EXAMINER

COVER LETTER

Registration Section

TO:

Division of Co	rporations				
SUBJECT:	Civil Affair	rs Solutions, LLC			
5000EC1		Name of Limited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Peter Moreno			
		Name of Person			
	Civ	il Affairs Solutions, LLC			
		Firm/Company			
	5524 N	NW 114th Avenue Unit 305			
		Address	55.		
Doral, Florida 33178			, A	1 1854 23	
City/State and Zip Code			S 7.		
	civil.affa	tirs.solutions.llc@gmail.com	on)		
For further information	concerning this matter, please of				
	e F. Melgarejo	ai (<u></u>	9-2437	<u></u>	
Name	of Person	Area Code & Daytime Te	lephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fe Certificate of S Certified Copy (additional cop	Status &	
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURIER Registration Section Division of Corporatio			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

	Civil Affairs S	olutions, LL	C	· 			
(Name of the Limite	d Liability Compa A Florida Limited	ny as it now apper Liability Company	ears on our records.)				
The Articles of Organization for this Limited 1	Liability Company	were filed on	03 January 2011	and as	ssigned		
Florida document numberL1100000	01350						
This amendment is submitted to amend the fol	llowing:						
A. If amending name, enter the new name	of the limited liab	ility company h	<u>ere</u> :				
	N/A	\					
The new name must be distinguishable and end w "L.L.C."	rith the words "Lim	ited Liability Com	pany," the designation "LL	or the	abbrevi	iation	
Enter new principal offices address, if applicable:		5524 NW 1	14th Avenue Unit 305	<u> </u>			
(Principal office address MUST BE A STREET ADDRESS		Doral, FI 33	178				
				70.F1 25.F1	4	6	
Enter new mailing address, if applicable:		5524 NW 1	14th Avenue Unit 305	, <i>S</i> S.	- 23		
(Mailing address MAY BE A POST OFFICE BOX)		Doral, Fl 33	178	· .			
				10 kg	w,		
				377	<u></u>		
B. If amending the registered agent and registered agent and/or the new registered or			our records, enter the	name (of the	new	
register on agent and or the new registered to	Mice addi ess nei	<u>c</u> .		•			
Name of New Registered Agent:	Peter Morer	10					
New Registered Office Address:	5524 NW 114th Avenue Unit 305						
	Enter Florida street address						
		Doral	, Florida	3317			
		City		Zip Cod	e		
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, Lhereby 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 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 **Title** Name Address Type of Action CEO Jose F. Melgarejo 7501 NW 112th Path ☐ Add Doral, Florida 33178 Remove VP Monica M. Melgarejo 7501 NW 112th Path ☐ Add ✓ Remove Doral, Florida 33178 CEO Peter Moreno 5524 NW 114th Avenue Unit 305 Doral, Florida 33178 Remove Remove □Add Remove __Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 27 October 2011 Dated Signature of a member or authorized representative of a member José F. Melgarejo Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00