Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160000083053)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: BLACKLEDGER ENTITY MANAGEMENT LLC

Account Number: I20150000089 Phone

: (305)444-8800

Fax Number

: (305)444-4010

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

LC AMND/RESTATE/CORRECT OR M/MG RESIGN FOCUS INVESTMENT ADVISORS, LLC

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03:41:07 p.m. 01-11-2016 2. (H16900008 3053)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOCUS INVESTMENT ADVISORS LLC					
(Name of the Limited Limited Company as it now appears on our record (A Florida Limited Liability Company)	ls.)	_			
The Articles of Organization for this Limited Liability Company were filed on 03/11/2011 and assign and assign document number L11000030884					
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	on "L.L.C	."		
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)		2016			
	- 1 - 3 - 2 - 10 - 2 - 22		1		
B. If amending the registered agent and/or registered office address on our record registered agent and/or the new registered office address here:	r	me_of	into poors		
	الرحم المساه الرحم المساه الرحم الرحم ال	J>	111		
Name of New Registered Agent:	<u>ga</u>	<u> </u>	- Charles		
New Registered Office Address:		50			
Enter Florida street addres	ss Iorida.				
. Pi	ULIUU.				

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

Zip Code

Page 1 of 3

(#16000008-3053)

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

Title	Name	<u>Address</u>	Type of Action
MGR	AMIR ARAZI	40 SW 13TH STREET STE 201	■ Add
		MIAMI, FL 33130	□ Remove
		**************************************	☐ Change
MGR	OREN ALBERT ARAZI	40 SW 13TH STREET STE 201	Add
		MIAMI, FL 33130	□ Remove
			☐ Change
MGR	LUIGI CATTANEO	40 SW 13TH STREET STE 201	Add
		MIAMI, FL 33130	□ Remove
			□ Change
			Add Change Add Add SSA Add
			Remove
			Add
			Remove
			Change

Page 2 of 3

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MARCELO C ALVES

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H&C	(416000008	305 31	03:41:29 p.m.	01-11-2016
D. If amending any other information	·		necessary.)	
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		<u></u>		200
E. Effective date, if other than the d (If on offective date is listed, the date must Note: If the date inserted in this bloc	Late of filing: be specific and cannot be prior to date of ck does not meet the applicable state	filing or more than 90 days	optional) after filing.) Pumi , this date will no	ent to 605.0207 (3)(b) of be listed as the
document's offective date on the Dep	nartment of State's records.		-	원 선 역 경우 선
If the record specifies a delayed (b) The 90th day after the record	effective date, but not an eff rd is filed.	ective time, at 12:	01 a.m. on th	رب درب
Dated JANUARY 11	. 2016	15/1	/	
·s	ignature of a member or authorized rep	seculative of a member		

Page 3 of 3

Typed or printed name of signee

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