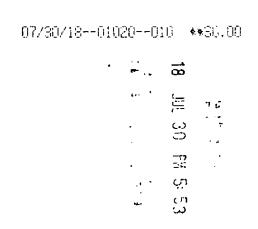
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		

Office Use Only



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July 24, 2018

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: One Concierge, LLC – Articles of Organization Amendment

Dear Sir or Madam,

Enclosed are the Cover Letter, Articles of Amendment to Articles of Organization of One Concierge, LLC, and a check for \$30.00 for the filing fee and certificate of status.

If you need additional documents or information to process the change, please contact me at (801) 705-4407 or <a href="mailto:ramonas@pmamediagroup.com">ramonas@pmamediagroup.com</a>.

Ramona Schelin

Paralegal

Síncerely,

## **COVER LETTER**

Div	ision of Corp	orations				
SUBJECT:	One Concier	ge, LLC				
Name of Limited Liability Company						
The enclosed	i Articles of A	mendment and fee(s) are subn	nitted for filing.			
Please return	all correspon	dence concerning this matter to	o the following:			
		Lori Kirkham				
			Name of Person			
		One Concierge, LLC				
Firm/Company						
	3300 N. Ashton Blvd., Suite 200					
		· · · · · · · · · · · · · · · · · · ·	Address			
		Lchi, UT 84043				
			City/State and Zip Code			
		lorik@pmamediagroup.com				
		E-mail address: (to	o be used for future annual report notifi	cation)		
For further i	nformation co	ncerning this matter, please ca	D:			
Lori Kirkha	m		801 705-4910			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is	a check for the	e following amount:				
□ \$25.00 I	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

.

TO: Registration Section

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

One Concierge, LLC				- "
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on ou Liability Company)	ur records.)	
The Articles of Organization for this Limited Lia	bility Company	were filed on March 29	9, 2011	and assigned
Florida document number L11000037689	·			ු
This amendment is submitted to amend the follow	wing:			- S
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the designal	tion "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		3300 N. Ashton Blvd.	, Suite 200	
		Lehi, UT 84043		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	9 <u>0X)</u>	3300 N. ASHTON BLV LEHI, UT 84043	—. VD., SUITE 200	<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:  New Registered Office Address:	COGENC	e: Y GLOBAL INC. DUN ST.SUITE 4 Enter Florida str	eet address	
	IVELWIWI	City	, Florida <u>3230</u>	Zip Code
		2		

## 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

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	<b>Type of Action</b>
MGR	Arman Motiwalla		
		160 W. CAMINO REAL559	■ Remove
		BOCA RATON, FL 33432	□ Change
MGR	Christopher Scanlon	3300 N. Ashton Blvd., Suite 200	Add
		Lehi, UT 84043	Remove
			☐ Change
			Add
			□ Remove
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effectiv t <u>e:</u> If th	date, if other than the ve date is listed, the date make the date inserted in this bear to a feetive date on the line.	ust be specific and block does not n	d cannot be prior neet the application	to date of filing or rable statutory filin	nore than 90 days	<b>pptional)</b> after filing.) F , this date w	rursuant to 6 ill not be li	05.026 sted a
record he 90	d specifies a delaye th day after the re	ed effective of cord is filed.	late, but no	t an effective	time, at 12:0	01 a.m. or	n the ear	lier (
ed	07/16/2	2018						
		Signature of	1/1	rized representation		2.	·	<u>.</u>
		orgination of a f	иненност от <u>яціло</u>	nzeu representativi	e of a member		٠ ـ	<del></del>
							C.	
	Annan Motiwalla						~ F	≣ ,
	Arman Motiwalla		Typed or printe	d name of signee				د.

Filing Fee: \$25.00