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TO:		istration Sect sion of Corpo		·	
eup IE	ý CT.	MIAQUA, L	LC		
SUBJE	SCI;		Name of Limit	ted Liability Company	
The en	closed	Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please	return	all correspon	dence concerning this matter t	to the following:	
			Gregory A. Sanoba, Esq., R	R.A.	
				Name of Person	
			The Sanoba Law Firm		
				Firm/Company	
			422 South Florida Avenue		
				Address	
			Lakeland, FL 33801		
				City/State and Zip Code	
			greg@sanoba.com		11
			E-mail address: (t	to be used for future annual report notifica	tion)
For fu	rther is	nformation co	ncerning this matter, please ca	all:	
Jessic	a Will	iams, The Sar	noba Law Firm	at ()	
		Name of	Person	Area Code Daytime To	elephone Number
Enclos	sed is a	a check for the	e following amount:		
■ \$2	25.00 F	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)

MAILING ADDRESS:
Registration Section

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

MIAQUA, LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records.) d Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L11000049513.	by were filed on 04/27/2011 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	407 Lincoln Road		
Principal office address MUST BE A STREET ADDRESS	ESS) Suite 8M		
	Miami Beach, FL 33139		
Enter new mailing address, if applicable:	407 Lincoln Road		
Mailing address MAY BE A POST OFFICE BOX)	Suite 8M		
	Miami Beach, FL 33139		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our records, enter the name of the ere:		
Name of New Registered Agent.			
New Registered Office Address:	Enter Florida street address		
New Registered Office Address:	Enter Florida street address		

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

IJ

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
			□ Add
			□ Remove
			Change
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			□ Remove
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in effective date is listed, the	date must be specific n this block does no	ling: and cannot be prior to date of the applicable state of State's records.	of filing or more than 9	(optional) 00 days after filing. ements, this date) Pursuant to 605.020 will not be listed a
record specifies a c The 90th day after t		e date, but not an e ed.	effective time, a	t 12:01 a.m.	on the earlier o
July 28th		2015	1		
				 - -	2015
	Signature c	of a member or authorized re	epresentative of a mer	nber	
	5		-	· · · · · · · · · · · · · · · · · · ·	1

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Filing Fee: \$25.00