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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNTANT & MANAGEMENT INC

Account Number : I:0110000070 Phone : (305)541-3980

Fax Number : (305)550-1294

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

| Email | Address: | <u> </u> |
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

INTERSNAX LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

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COVER LETTER

| TO: | Registration Se Division of Cor | | | • | |
|-------------|------------------------------------|---|---|---|--|
| \$UBJ | ECT: | INTER | RSNAX LLC | • | |
| | | | | | |
| The er | closed Articles of | Amendment and fee(s) are subt | nitted for filing. | | |
| Please | return all correspo | ndence concerning this matter t | to the following: | • | |
| | | | JOSE NAE | | |
| | | | Name of Person | | |
| | | | | | |
| | | | Firm/Company | , | |
| | | 1 | 1549 NE 123RD ST | | |
| | | 1 | Address | | |
| | | NO | RTH MIAMI, FL 33161 | | |
| | | | City/State and Zip Code | | |
| | | COM ion) | | | |
| For fu | rther information co | oncerning this matter, please ca | be used for fiture annual report notificut | , | |
| JOSE NAE | | | at (305) 54 | 11-3980 elephone Number | |
| | | | | | |
| Enclos | ed is a check for th | e following amount: | | | |
| ₹ 25 | 5.00 Filing Fce | S30.00 Filing Pee & Certificate of Status | \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) | |

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| INTERSNAX LLC | | | | | 7 |
|---|--|--|----------------------------------|----------------|--------|
| (Name of the Limites | Linbility Compan Florida Limited Li | y as it now appear ability Company) | s on our records.) | 2: 02 | RATION |
| The Articles of Organization for this Limited L | iability Company v | vere filed on | 06/08/2011 an | nd assigned | •, |
| Florida document numberL1100006 | 7092 | | | | |
| This amendment is submitted to amend the following | owing: | | | | |
| A. If amending name, enter the new name o | f the limited liabi | ity company her | <u>e</u> : | | |
| | BIZ TRADIN | IG LLC | | | _ |
| The new name must be distinguishable and end w "L.L.C." | th the words "Limit | ed Liability Compa | ny," the designation "LLC" of | r the abbrevia | ation |
| Enter new principal offices address, if applic | ca ble: | | | | |
| Principal office address MUST BE A STREE | ET ADDRESS) | | | | _ |
| | | | | | _ |
| | | | | | |
| Enter new mailing address, if applicable: | | | | | _ |
| (Mailing address MAY BE A POST OFFICE | BOX) | • | | | |
| · | | | | | _ |
| B. If amending the registered agent and registered agent and/or the new registered of | | | our records, <u>enter the nx</u> | me of the | nev |
| Name of New Registered Agent: | GINY ABITE | OL | | | _ |
| New Registered Office Address: 3461 SW 52ND ST | | | | | |
| | | En | ter 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 abligations 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. 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

Florida

33312

Zip Code

Page 1 of 2

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FT LAUDERDALE

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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 MCRM = Managing Member Address Type of Action Title Name MGR ABITBOL, GINY 3461 SW 52ND ST Add Remove FT LAUDERDALE FL 33312 US MGRM ABITBOL, GINY 3461 SW 52ND ST 7 Add ET LAUDERDALE EL 33312 US Remove MGRM ABITBOL, ISAAC 3461 SW 52ND ST FF Add FT LAUDERDALE FL 33312 US MGR ABITBOL, ISAAC 3461 SW 52ND ST FT LAUDERDALE EL 33312 US Remove) Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPTEMBER 21 2011 Dated. Signature of a member or authorized representative ISAÀG ABITBOL

Typed or printed name of signed Page 2 of 2

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