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Dear State of Florida,

Luminous Glass Distributors of Florida, LLC would like to amend its Articles of Organization.

Attached please find two resignation of managing members documents. These members status has changed to authorized member from managing member.

Please call me with any questions at 847 915 8604.

Thank you

Kristin-Have:

CEO

Luminous Glass Distributors of Florida, LLC

1140 NW 159th dr

Miami Florida 33138

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 7 18 201 and assigned Florida document number 100008239.0  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 "LLC."  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)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	Luminous (Name of the Limited)	S Gass Liability Company a Florida Limited Liabi	DISTIBLE SITE OF SITE	to (3 of	flo	rida LL	(
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 "LLC."  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)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	The Articles of Organization for this Limited Liab	ility Company we		8/2011	and as	signed	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	This amendment is submitted to amend the following	ing:					
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B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	Enter new mailing address, if applicable:				16 AU6 22		
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Enter Florida street address, Florida							
···· / · · · · · · · · · · · · · · · ·	New Registered Office Address:		Enter Florida stre	et address			
Σή,	-		City	, Florida	Zip Code		

## 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 = Aut	horized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Bradley Sriffith	1140 NW 159th Dr Miami FL	
	<u> </u>	Miami FL	□ Remove
<b>.</b>		MRR	Change
AMB K	Thomas ODonnell	1140 NW 159th Dr	Add
		Miami FL	☐ Remove
		A MIBRA	Change
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