

L 11000083910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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12 JUN 18 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
JUN 20 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: As Rx Holdings, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCISCO J. GONZALEZ
Name of Person

FG & PM HOLDINGS, LLC
Firm/Company

60 SW 13TH STREET UNIT 3200
Address

MIAMI, FLORIDA, 33130
City/State and Zip Code

PCmasforroll@primestarcenterprises.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETER C. MASFORROLL at (305) 336-0778
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 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
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

FILED
12 JUN 18 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As Rx Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/21/2011 and assigned
Florida document number 110000083910.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

60 SW 13 Street

UNIT 3200

Miami, FL 33130

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

60 SW 13 Street

Unit 3200

Miami, FL 33130

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

FG 3 PM Holdings, LLC

New Registered Office Address:

60 SW 13 ST UNIT 3200

Enter Florida street address

Miami

City

Florida

33130

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 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

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:

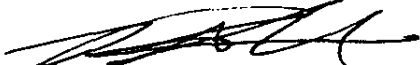
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Prime-Star Enterprises, LLC	218 SE 14 ST Miami, FL 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	FG BPM Holdings, LLC	60 SW 13 ST Unit 3200 Miami, FL 33130	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Mike Cross Fire, LLC	950 Brickell Bay Drive Unit 801 Miami, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JUNE 13th, 2012


Signature of a member or authorized representative of a member

PETER C. MASFUBROLL
Typed or printed name of signee