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MENDMENT GANIZATION

	MIONE	(i, LLC	4
(Name of the Limited L (A F	a illityl Comi (rida) Limited	as it now appears on our records.) bility Company)	\$
The Articles of Organization for this Limited Lial	ly Compa	rere filed on09/14/2011 and assigned	
Florida document numberL110001052	<u> </u>		
This amendment is submitted to amend the follow			
A. If amending name, enter the new name of A	ellimitedille	ity company here:	
The new name must be distinguishable and end with the "L.L.C."	hPrebrows	ed Liability Company," the designation "LLC" or the abbreviation	- ion
Enter new principal offices address, if applicate	C8	·	_
(Principal office address MUST BE A STREE	(DDRESS)		-
Enter new mailing address, if applicable:			-
Mailing address MAY BE A POST OFFICE 3D	X 9		-
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B. If amending the registered agent and/b a registered agent and/or the new registered of the		fice address on our records, enter the name of the no	<u>2W</u>
Name of New Registered Agent:			-
New Registered Office Address:		Enter Florida street address	
		. Florida	
		City Zip Code	
New Registered Agent's Signature, if changing I egi	stered At	ti.	
hereby accept the appointment as registed and the provisions of all statutes relative to the proposice of the proposition as really features of the proposition of this characteristic of the company has been notified in writing of this characteristic.	edazan edazan s	ree to act in this capacity. I further agree to comply with plete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is e address, I hereby confirm that the limited liability	d
	I is	anging Registered Agent, Signature of New Registered Agent	

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: 1 of 2

If amending the Managers or Managing Memiors on our or Managing Member being added or removed from our res rds, enter the title, name, and address of each Manager MGR = Manager MGRM = Managing Member <u>Title</u> Name **Addin** Type of Action RICARDO COMBERTI MGR ☑ Add ☐ Remove coln Road <u>Anl</u> leach, FL 33139. ☐ Add Remove Add Remove Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) heres tach additional sheets, if necessary.) October 11 Dated_ presentative of a member Signature of a member oriauthorize Au a M. Gare Oliver Typod or printed na of signee Page 20 ing Deer & 5.00