Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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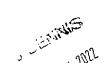
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ited Liability Company at H now agnessed in (A Florida Limited Liability Company)	
The Articles of Organization for this Limited L	Liability Company were filed on 12/16	2011 and ussigned
Plorida document number L11000141509		
This amendment is submitted to amend the foll	llowing:	
L. If amending name, enter the new name of	of the limited liability company here	:
· 		
he new name must be distinguishable and contain the	words "Limited Liability Company," the design	mation "LLC" or the abbreviation "LL.C."
Enter new principal officer address, if appli		
Principal office address MUST BE A STRE		
	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	••	
B. If amending the registered agent and/or.	registered office address on our reco	ords, enter the name of the new rec
	Est here:	
agent and/or the new registered office addr		
- , ,	TULIO KUNZLE	
Name of New Registered Agent:	TUEIO KUNZLE 1133-102ND STREET SUITE 304	
"	1133-102ND STREET SUITE 304	street àddress
Name of New Registered Agent:	1133-102ND STREET SUITE 304	

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 us provided for in Chapter 605, F.S. Or, if this document is being filled 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:

or removed from our records:	
MGR = Manager AMBR = Authorized Member	

Title	<u>Name</u>	Address	Type of Action
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	 re: (Attach additional sheets, if necessary)	:. ,
		
		
		
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Signature of a member or authorized representative of a member

Typed or printed name of signee

ANDREA MARIA ZUCCOLILLO PAPPALARD