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From:		1
	Account Name : SUPERBIZ.COM, INC.	Α̈́S
	Account Number : I20070000160	
	Phone : (800)494-3124	
	Fax Number : (305)675-2811	

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RUI DIRECT, LLC

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( <u>Name of the Limited Lia</u> (A Fio	bility Company orda Linuted Link	as it now appear othry Company)	s on our records.)		
The Articles of Organization for this Limited Liability Florida document number	y Company wo	ere filed on	DECEMBER 23, 201	and as	signed
This amendment is submitted to amend the following	<u>;</u> :				
A. If amending name, enter the new name of the l	<u>imíted liabilit</u>	y company he	<u>re</u> :		
The new name must be distinguishable and contain the words	Limited Limbility	Connesses " the d	esionation "LC" or the	L' noinivende	1.00
Enter new principal offices address, if applicable:			STREET #204	<b>1</b> 6	
(Principal office address MUST BE A STREET AL)	DRESS)	HIALEAH,	FLORIDA 33013	() ()	
	-	501 E 24TH	STREET #204	 <u>\$</u>	123
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	- <u>)</u> -	налелн,	FLORIDA 33013		
B. If amending the registered agent and/or registered agent and/or the new registered office a			our records, <u>ente</u>	r the name	of the new
New Registered Office Address:	501 F. 24TH S	TREET #204			
TENT HOSPITAL STITLE STITLESS.		Enter Flor	rida street address		
	HIALEAH		, Florida _	33013	
		City		Zip Cock	
New Registered Agent's Signature, if changing Regist	ered Agent:				

If Changing Registered Agent, Signature of New 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H160003123143

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	RICARDO M GARRIDO	8571 SW 29TH STREET	
		MIAMI, PLORIDA 33155	■ Remove
			☐ Change
MGR	STEPHANIE GELABERT	501 F 24TH STREET #204	
		INALEAH, FLORIDA 33013	☐ Remove
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