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SECRETARY OF STATE

MAY 13 2015 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tamada, 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:	
Tanya Tsveyer Name of Person	
Firm/Company	
377 Poinciana Island Drive	2
Sunny Isles Beach, FL 3316 City/State and Zip Code Tanyas Florida agmail. earn B-mail address: (to be used for future arrival report notification)	5 <i>0</i>
For further information concerning this matter, please call:	
Tanya Tsveyer at (954) 818-0760 Name of Person Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$25.00 Filing Fee \$\times \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \$Certified Copy \\ \text{(additional copy is enclosed)}\$\$\$ \$Certified	of Status &

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 ARTICLES OF O	O PRGANIZATION	2015 HAY -6 SECRETARY TALLAHASS
The Articles of Organization for this Limited Liability Company Florida document number <u>L/20000004</u> 51	ny as it now appears on our records.) Liability Company) were filed on	PH 5: 12 2 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abl	breviation "L.L.C."
Enter new principal offices address, if applicable:	377 Poinciana Is Sunny Isles Ba	land DRIVE
(Principal office address MUST BE A STREET ADDRESS)	Sunny Isles Ba	<u>ach FL 33</u> 160 ———
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	377 Poinciana: Sunny Isles Bea	<u>Island D</u> RIV ach, FL 3316
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent: New Registered Office Address: 377 Per	DINCIANA ISLAND Enter Florida street address	Brive
Sunny.	Dinciana Island Enter Florida street address Isles Beach, Florida City	33160 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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			□ Remove
			☐ Change
			Add
		<u> </u>	Remove
			Change
	· · · · · · · · · · · · · · · · · · ·		Add
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			ASSET CORRESPONDENCE
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			Remove
			□ Change

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(If an e	effective date, if other than the date of filing:	207 (3), as the
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