

L/2000026986

Oct 29 2014 2:13PM HP LASERJET P1102

Division of Corporations

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Florida Department of State
Division of Corporations
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EFFECTIVE DATE
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MENDEZ ACCOUNTAX SERVICES, CORP
Account Number : I20060000145
Phone : (305) 769-4936
Fax Number : (305) 769-1844

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MODULU INVESTMENT, LLC.

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EFFECTIVE DATE
10-29-2014

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2014 OCT 29 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MODULU INVESTMENT, 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 02/24/2012 and assigned
Florida document number L12000026986

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

3970 W 12 AVE

HIALEAH, FL 33012

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

3970 W 12 AVE

HIALEAH, FL 33012

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:

New Registered Office Address:

Enter Florida street address

City, Florida

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

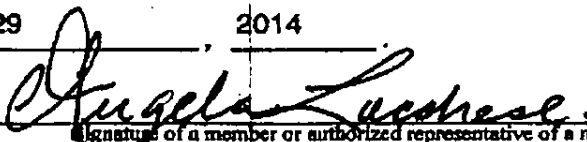
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ROSA E AZZATO SORDO	2463 PROVENCE CIR	<input type="checkbox"/> Add
		WESTON FL 33327	<input checked="" type="checkbox"/> Remove
AMBR	ANTONIO MORANA	2463 PROVENCE CIR	<input checked="" type="checkbox"/> Add
		WESTON FL 33327	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: OCT 29, 2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated OCT 29, 2014



Signature of a member or authorized representative of a member

ANGELA LUCCHESI

Typed or printed name of signee

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TALLAHASSEE, FLORIDA