

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L12000029956

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PAUL SALVER, P.A.
Account Number : I20020000087
Phone : (954) 389-1333
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
1099 SHOTGUN, LLC**

| | |
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June 3, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

1099 SHOTGUN, LLC
3221 HUNTINGTON
WESTON, FL 33332

SUBJECT: 1099 SHOTGUN, LLC
REF: L12000029936

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The signature of the authorized representative and the typed name under the signature must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H15000131098
Letter Number: 615A00011602

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1099 SHOTGUN, 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 3/1/12 and assigned
Florida document number L12000029956

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

1099 SHOTGUN ROAD

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

SUNRISE, FL 33326

Enter new mailing address, if applicable:

1099 SHOTGUN ROAD

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

SUNRISE, FL 33326

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

Florida

City

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 = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------|-------------------|--|
| MGRM | DAHER, JOSEPH R. | 1099 SHOTGUN ROAD | <input type="checkbox"/> Add |
| | | SUNRISE, FL 33326 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| MGRM | DAHER, RICARDO J. | 1099 SHOTGUN ROAD | <input type="checkbox"/> Add |
| | | SUNRISE, FL 33326 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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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: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated X June 1st, 2015

X Roberto Daher

Signature of a member or authorized representative of a member

ROBERTO DAHER

Typed or printed name of signee

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