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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CREENSPOON MARDER, P.A.

Account Number : 076064003722 : (888)491-1120 Phone Fax Number : (954)343-6962

**Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.* Email Address: MIChael

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MVP EQUIPMENT GROUP, LLC

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

MVP EQUIPMENT GROUP, LLC

(Name of the Limited	Liability Company as it no	ow appears on our records.)
	Florida Limited Liability C	ow appears on our records.)

(A Florida Limited	Liability Company)	· · · · · · · · · · · · · · · · · · ·	, ,
The Articles of Organization for this Limited Liability Company	y were filed on	JUNE 04, 2012	and assigned
Florida document number <u>L12000074368</u> .			•
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited line	bility company he	re:	
MVP GROUP LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the d	esignation "LLC" or the al	nbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
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			写新上一
Enter new mailing address, if applicable:	·		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			199 -
B. If amending the registered agent and/or registered of	office cultivess con	our records enter	the name of the new
registered agent and/or the new registered office address her		vat records, emer	5 20
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida 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

AMBR =	Manager Authorized Member	
Title	Name	Address Type of Action
		□ Add
		□ Remove
		□ Change
		□ Add
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	information, enter ch	ange(s) here: (Attoch ad	ditional sheets, if nacessary	v.)
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	than the date of filing	t cannot be prior to date of filing	or more than 90 days after filing)) Pursuant to 605.0207 (3)(b
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