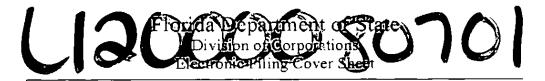
Division of Corporations

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To:

Division of Corporations

Fax Number : (350)617-6353

From:

Account Name : TAX, ACCOUNTING AND FINANCIAL EXPERTS

Account Number : I20120000058 Phone : (305)760-2011 Fax Number : (366)895-8710

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: epuka76@aol.com

3年-2 附 8:82

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 360 MULTIPLY LLC

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	TIPLY LLC	
(Name of the Limited Liability Con (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the o	
Euter new principal offices address, if applicable:		6 6 9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
(Principal office address MUST BE A STREET ADDRESS)		
		) 1 3 (1) (1) (1)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· <u>· · · · · · · · · · · · · · · · · · </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		r the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street oddress	
	. Florida	
	, Florida	Zıp Cade

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>	Address	Type of Action
MGRM	FRANGELLA, NICOLAS	4700 SHERIDAN	□ Add
		STE J	<b>≅</b> Remove
		HOLLYWOOD, FL 33021	☐ Change
			D Remove
			Change
		<u> </u>	Add
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		<del></del>	☐ Change
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			Change Change
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			П Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

····		
<del> </del>		
E. Effantive data if other than	the date of filing:	(outional)
Iff an effective date is listed, the date	the date of filing: must be specific and cannot be prior to date of filing or no	re than 90 days other filing ) Pursuant to 605,0207 (3)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing to Department of State's records.	requirements, this date witt not or fished as the
	•	
If the record specifies a dela	yed effective date, but not an effective ti	me, at 12:01 a.m. on the earlier of:
(b) The 90th day after the	record is filed.	
	2017	
Dated August 31st		
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	SCAN CARLOS SANCHO HIDALGO	€Ö≳ I perce
	pped or printed name of signee	
	Page 3 of 3	ရွိနို <b>့ မာ</b> ကို မ
	E.	<u> </u>