

Apr. 22. 2016 2:56PM

No. 0172 P. 1

**Florida Department of State**  
**Division of Corporations**  
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To:

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

From:

Account Name : INCORPORATING SERVICES FL  
Account Number : I20050000052  
Phone : (850) 656-7956  
Fax Number : (850) 656-7953

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

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**EMS EXHIBITS MIAMI, LLC**

Certificate of Status	0
Certified Copy	1
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APR 25 2016

**S. YOUNG**

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Apr. 22. 2016 2:57PM

No. 0172 P. 2

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

EMS Exhibits Miami, 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 6/18/2012 and assigned  
Florida document number L12000082649

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

SME Miami, LLC

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:

2500 W. Lake Mary Blvd., Suite 107

(Principal office address MUST BE A STREET ADDRESS)

Lake Mary, FL 32746

Enter new mailing address, if applicable:

2500 W. Lake Mary Blvd., Suite 107

(Mailing address MAY BE A POST OFFICE BOX)

Lake Mary, FL 32746

**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:

Sharon Butera

New Registered Office Address:

2500 W. Lake Mary Blvd., Suite 107

Enter Florida street address

Lake Mary

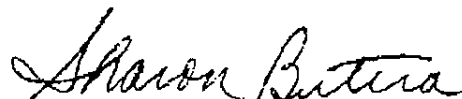
Florida 32746

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>
MGR	Christoph Rahofer	5310 N. Central Ave.	<input type="checkbox"/> Add
		Tampa, FL 33603	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ahmad Fathullah Bin Mustaffa	2500 W. Lake Mary Blvd., #107	<input checked="" type="checkbox"/> Add
		Lake Mary, FL 32746	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Dated 4/22 2016

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Ahmad Fathullah Bin Mustaffa, Manager  
\_\_\_\_\_  
Typed or printed name of signee