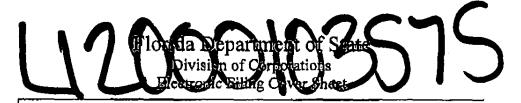
Division of Corporations

Page I of 2



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number: I20080000067

: (845)425-0077

Fax Number

: (845)818-3568

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YADA LLC

Certificate of Status	0
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D. SCOTT

7 2016

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YADA LLC	·	
(<u>Name of the Limited Liabillr</u> (A Florida	v Company as it now appears on our records.) Limited Liability Company)	
he Articles of Organization for this Limited Liability Co	ompany were filed on 08-13-2016	and assigned
Plorida document number L12000103575	·	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
he new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
ater new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
		7 SE 5
3. If amending the registered agent and/or regist		er the name of the
egistered agent and/or the new registered office addr	ress here:	景の当
		SSE & F
Name of New Registered Agent:		FRO
New Registered Office Address:		TRUE TO THE
New Registered Office Auditess.	Enter Florida street address	ಇರಿಗೆ.
	979 13.	DATE OF
	, Florida	7in 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

Title	Name	<u>Address</u>	Type of Action
MGRM	Arie Bentov	14 Hamaapil, Rehovot 76348, IL	
			■ Rennove
			□ Change
MGRM	Yuval Bentov	14 Hamaapil, Rehovot 76348, IL	B Add
			Remove
			Change
MGRM	Amir Bentov	661 Chen Blvd. Rehovot	Add
		7646950, TL	Remove
			□ Change
			Remove
			ALLA INSSET FLORIDA DA Add
			□ Remové
			Change

	<u> </u>	
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<u>lote:</u> If the date inserted in this blo ocument's effective date on the De	effective date, but not an effective tin	requirements, this date will not be listed as
	2016	SEI SEI
December 5th		
ated		OSC CRETI
ared	Signature of a member or authorized representative of	Ca member SSE -6
ated	andre C	

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Filing Fee: \$25.00