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| | | 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 : LAZARUS CORPORATE FILING SERVICE, INC. ATC Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440 **Enter the email address for this business entity to be used for future 0 email Address: Email Address: | |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN SERVICE BROKER 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 1/25/2013 and assigned Florida document number L13000013324

This amendment is submitted to amend the following:

....

01/01/2031 01:41

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

| Enter | new principal offices address, if applicable: | ×∽ | 2011 | |
|-------|--|---|------------|---------------|
| (Prin | cipal office address MUST BE A STREET ADDRESS) | | ר <u>ר</u> | ືກ |
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| | · · · · · | | 9 | 124540 |
| Enter | new mailing address, if applicable: | ري بي | 2 | 2 3 1 |
| Mail | ing address MAX BE A POST OFFICE BOX) | | 8 | Party |
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B. If amonding 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:

| | City | , Florida Zip Code |
|--------------------------------|-------|------------------------------|
| New Registered Office Address: | | Enter Florida street address |
| Name of New Registered Agent: | ; | · |

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 608, 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 Accut

Page 1 of 3

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records;

| | Name | Address Type of Action |
|--------------|--------------------|---|
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D. If smeading any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated hnc Tinna Signature of a member or authorized representative of a member GABRIEL HAMMAL Typed or printed name of signee Page 3 of 3 Riling Fee: \$25.00 2013 FEB 1 19 /in 8:55 H130G0038734