Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000257959 3)))



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**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 MAXIMUM GROWTH RESEARCH INTERNATIONAL LLC

Certificate of Status	0
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Help



November 6, 2014

FLORIDA DEPARTMENT OF STATE

MAXIMUM GROWTH RESEARCH INTERNATIONAL LLC 4160 RAVENSWOOD RD 8
DANIA, FL 33312US

SUBJECT: MAXIMUM GROWTH RESEARCH INTERNATIONAL LLC

REF: L13000013413

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date cannot be prior to the date of filing.

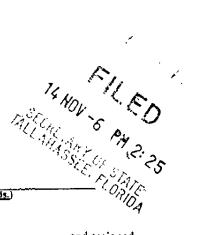
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Teresa Brown Regulatory Specialist II FAX Aud. #: H14000257959 Letter Number: 314A00023758

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



MAXIMUM GROWTH RESEARCH INTERNATIONAL 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 or	01/25/2013	and assigned
Florida document number L13000013413	'		
This amendment is submitted to amend the following:	•	i	·
A. If amending name, enter the new name of the lin	nited liability compan	v here:	
The new name must be distinguishable and end with the words "L	imited Liability Company,	' the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET ADD	RESSI	·	
Enter new mailing address, if applicable:			
(Mailing address MAY RE A POST OFFICE BOX)			*
B. If amending the registered agent and/or regi	istered office address	s on our records, enter t	he name of the new
registered agent and/or the new registered office ad-	dress here:	7 OH VAI 1000 KOO, <u>VAIVO V</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Register			
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered to being filed to merely reflect a change in the register company has been notified in writing of this change	complete performanc agent as provided for red office address, I h	e of my duties, and I am fa in Chapter 605, F.S. Or, i	miliar with and f this document is
•	If Changing Registers	d Agent, Signature of New Rev	istered Agent

Page 1 of 3

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

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MOGOLLON, JUAN C	4160 RAVENSWOOD ROAD STE 8	
		DANIA, FL 33312	■ Remove
MGMR	LOELKE, CLAUDIA	5100 SW 135 AVE	Add
		SW RANCHES, FL 33330	Remove
			Add Remove
			Add
			Add Remove

. If amending any other information,	enter change(s) here: (Aitach	additional sheets, if necessary.)
Effective date, if other than the date (The effective date must be specific, cannot be the date this document is filed by the Florida D	prior to date of receipt or filed date and	(optional) d cannot be more than 90 days after
Dated OCTOBER 28	2014	
Signa KENDT BAGGETTO	sture of a member or authorized repre	sentative of a member
	Typed or printed name of	signee