Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP

Account Number : I20100000009

Phone : (305)599-0839

Fax Number

: (305)592-9591

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

Email	Address:	:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JANUS PARTNERS, LLC

Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$25.00

C. LEWIS

APR 17 2013

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION 13 APR 16 AM 8: 26

O	F	SECRETARY O	FISTATE
		TALLAHASSEE	, FLORIDA
A) ZUNAT	rtners.	<u>دا د</u>	
(Name of the Limited Liability Compa (A Florida Limited)	nv as it now ande Liability Company	ars on our records.)	
·			
The Articles of Organization for this Limited Liability Company	/ were filed on	02/12/2013	_ and assigned
Florida document number L13000022880			
•			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lish	ility company h	ere:	
,		•	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Comp	pany," the designation "LLo	O" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAX BE A POST OFFICE BOX)	·		
INTUINING WHITE WAY DE A FOST OFFICE POOF			
B. If amending the registered agent and/or registered or	ffice address on	our records, enter the	name of the new
registered agent and/or the new registered office address her		, <u> </u>	
Name of New Registered Agent:			
• •			
New Registered Office Address:		inter Florida street addre.	
		1999 - 1 14 1994 91 251 141111 C	N
<u></u>		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	Ĺ		

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 Agent

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

MGR = Manager

MGRM = Managing Member Title <u>Address</u> Type of Action <u>Name</u> NE 6 AVE 16921 MGRM MARCEUS MADSEN NORTH MIAMI PL 33162 Remove CPJ PROPERTIES, LL 16921 NE 6th AVE MGAM NORTH MIAMI, FL 33162 Remove PROPERTY EXTREME SW 97 AVE Add 17406 & INVESTMENTS, LLC Management MGRM Swite 123 PAL METTO BAY PL 33157 Remove Remove

D. If an	nending any other	information, enter change(s) here: (Auach additional sh	seets, if necessary.)	
_	REMOVE	Member	SAVANAH	ANTYMA	<u>E</u> nterpases
			10481 TRIA	NON PLAC	LLC E
			MELLING TON	, Fi 33°	±49
					
Dated	APRIL	15 , 20	3.		_
		Signification of a memory of	authorized representative of a n	10th	
		<u> </u>	Printed name of signee		<u>_</u>
	•		Page 3 of 3	r	
		Füh	ng Fee: \$25.00		

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13 APR 16 AM 8: 26

SECRETARY OF STATE SECRETARY SEE, FLORIDA