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(((H140000113913)))



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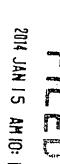
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CAPRI K TIC LLC

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From: CAPRI K TI JOSEF STRAUSS

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAPRI K TIC LLC	3.		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our reco d Liability Company)	rds.)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L13000026505</u>	y were filed on 2/20/2013	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
The new name must be distinguishable and end with the words "L "L.I.C."	imited Liability Company," the desig	nation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		201	
Enter new mailing address, if applicable:		ASSE ASSE	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the nev	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida st	reet address	
	, Flo	, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	nt:		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple	nt: gree to act in this capacity. I fur	rida Zip Code ther agree to comply w d I am fumiliar with an	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

01 (((F1400b01159195) From: CAPRI K TI JOSEF STRAUSS Page: 3/4 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 = Manager AMBR = Authorized Member **Title** <u>Name</u> <u>Address</u> Type of Action MGRM **ROBERT WOLF 4706 18TH AVENUE** Add BROOKLYN, NY 11204 MGR RAYMOND KATZ 21 ROBERT PITT DRIVE, SUITE 202 MONSEY, NY 10952 Remove Remove Remove

1(H140000113913)) ⁰⁵	rom: CAPRI K TI JOSEF STRAUSS	Page: 4/				
D. If amending any other infort	nation, enter change(s) here: (Attach additional shee	is, if necessary.)				
 .						
<u> </u>						
and and the second sec						
E. Effective date, if other than t (If an effective date is listed, the d	ne date of filing:ate must be more than 90 days a	(optional) fter filing.) (605.0207 (3)(b)				
Dated January 14	2014					
/s/ Raymond K						
	Signature of a member or authorized representative of a member					
_Raymond Katz	Typed or printed name of signee					
	Page 3 of 3					

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