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COVER LETTER

	ion Section - of Corporations	
SUBJECT: FFA	A HOLDINGS, LLC	
	Name of Limited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.	
Please return all co	prespondence concerning this matter to the following:	
	MARTIN J. CHAMPAGNE, JR.	
	Name of Person	
	CHAMPAGNE LAW FIRM, P.A.	
	Firm/Company	
	PO BOX 3288	
	Address	
	ST. PETERSBURG, FL 33731-3288	
	City/State and Zip Code	
	mjc@champagne-law.com E-mail address: (to be used for future annual report notification)	
For further informa	ation concerning this matter, please call:	
MARTIN J.	CHAMPAGNE, JR. at (727) 498-5212	
N	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check	k for the following amount:	
♀ \$25.00 Filing F	Tee □\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	scd)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FFA HOLDINGS, 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 ____02/27/2013 and assigned Florida document number L13000030136 This amendment is submitted to amend the following: 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Zip Code City

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 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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR MAI	MARIO MONGINI	464 CONSERVATION DRIVE	Add
		WESTON, FL 33327	X Remove
MGR JUAN MARIO MONGINI	JUAN MARIO MONGINI	464 CONSERVATION DRIVE	X Add
	WESTON, FL 33327	Remove	
		Add	
			Remove DIVISIONE SECRE
		FILED OF CORPOR	
		AM 10: 53	
			Add
			Remove
			Add
		Remove	

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ated	7-11-2013
	MIVIL
	Signature of a member or authorized representative of a member
	MARTIN J. CHAMPAGNE, JR.
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF RATIONS DIVISION OF CORPORATIONS