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	Ta:	Division of Corporations Fax Number : (850)617-6383		SECKELA		4.
	From;	Account Name : MARTIN ACCOUNTING & TA Account Number : I20060000012 Phone : (305)826-5886 Fax Number : (305)722-0535	AX SERVICE, INC	CELELORIOA	н 8: 46	
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ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

PROSPERITY HOLDINGS USA, 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 05/01/2013 and assigned Florida document number L13000064092

This amendment is submitted to amend the following:

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

(Principal office address MUST BE A STREET ADDRESS) PEMBROKE PINES, FL 33028-2060 Image: Street address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	Enter new principal offices address, if applicable:	17069 NW 23RD STREET	SE	16		
Enter new mailing address, if applicable:		PEMBROKE PINES, FL 33028-2	060	JUL	n de la companya de l	**
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(Mailing address MAY BE A POST OFFICE BOX) PEMBROKE PINES, FL 33028-2060		PEMBROKE PINES, FL 33028-2	<u>~</u>	<u>.</u>		

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:	17069 NW 23RD STREET	
······································	Enter Flo.	rida street address
	PEMBROKE PINES	, Florida 33028-2060
	City	Zip Code

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 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.

X MANA WAIA TOLO If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

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AMBR = Authorized Member

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

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