Division of Corporations

## 7 6000 7 June Florida Department of State

PRINCIPLE.

Division of Corporations

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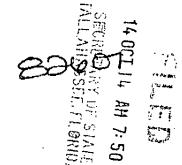
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

A- DEALS GROUP LLC Certificate of Status Certified Copy 04 Page Count \$25.00 Estimated Charge



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CORP USA

10/14/2014

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

RIGHECCONITY

X, X	
~	

A-DEALS GROUP LLC		
(Name of the Umited Liability Comp. (A Florida Limited	any as it now annears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number <u>L13000073044</u>	y were filed on 05/20/2013 and a	ssigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Limited Lie	shifting Company," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:	<del>Z</del> s	هي
(Principal office address MUST BE A STREET ADDRESS)	(T)	0
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	<b> </b>	The Property
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		2 111113
		C)
	or the second	<del>,</del>
B. If amending the registered agent and/or registered organizated agent and/or the new registered office address he	office address on our records, enter the nam	e of the new
Name of New Registered Agent:	·.	
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<del></del>
	City Zip Coo	le

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.

If Changing Registered Agent, Signature of New Registered 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 = Manager AMBR = Authorized Member Title Name Address Type of Action 5284 NW 134TH AVE ANGEL D. FERMIN MGR □ Add **DORAL, FL 33178** Remove 5284 NW 134TH AVE MGR CARLOS D. RODRIGUEZ ☐ Add **DORAL, FL 33178** Remove □ Add ... Remove \_□ Add □ Remove □ Add

Page 2 of 3

D Remove

If amending any other information,		,
<u></u>		
Effective date, if other than the date (The effective date must be specific, cannot be the date this document is filed by the Florida L	rior to date of receipt or filed date and cans	(optional) not be more than 90 days after
Dated October, 10	2014	
Q.	THENNOTENO	P
	ture of a member or authorized representa	tive of a member
Carenngie Rod	riguez	
	Typed or printed name of signe	

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