Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000270819 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC

Account Number : I20000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

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 ALIEF HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

FILE DOO2

2013 DEC 10 AM 7: 59

SLOWLIARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lin (A Flo	bility Company as it now appears rids Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabil Florida document number <u>L13000075501</u>	ity Company were filed on 05/2	23/2013 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	limited liability company here	:
The new name must be distinguishable and end with the	s words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<b>:</b>	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing oddress, if applicable: (Mailing address MAY BE A POST OFFICE BOX	Ω	
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:	egistered office address on ou address here:	r records, enter the name of the ne
Mains of Iven Kesistoled Assist		Marine property of the control of the first of the control of the
New Registered Office Address:	Ente	r Florida stresi address
		. Florida
_	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

ALIEF HOLDINGS LLC

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, enter 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>Name</u>	Address	Type of Action
MGRM	OBDULIA LEMUS	1300 NW 84 AVE	Add
	<del></del>	DORAL FLORIDA 33120	
			<del></del> .
			Ädd
		,	Remove
•			
			Add
			Remove
			uu.
<del></del>			Add
			Remove
			<u>.</u>
<del></del>			Add
			Remove
			_
			Add
			Remove

lfán	neuding any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
		,	
	<del></del>		
ited	12.10.	<u>25/3</u>	
	Signature of a member or authorized representative of a member		
	NELSON CA	RMENATES	
	Typed or printed name of signee		
		Page 3 of 3	

2013 DEC 10 M 7: 59
2013 DEC 10 M 7: 59
2014 DEC 10 M 7: 59