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| Certified Copies        | Certificate           | s of Status |
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| Special Instructions to | Filing Officer:       |             |
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DIVISION OF CORPORATION

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## **COVER LETTER**

| Divis           | sion of Corp  | orations                                     | •   |   |
|-----------------|---------------|--|---|---|
| SUBJECT:        | FERRARI G     | ROUP, LLC                                    |   |   |
| sobotie : _     |               | Name of Lim                                  | ited Liability Company  |   |
| The enclosed .  | Articles of A | amendment and fee(s) are sub-                | mitted for filing.  |   |
| Please return a | all correspon | dence concerning this matter                 | to the following:   |   |
|                 |               | ELISABETTA SERRANO                           | )   |   |
|                 |               |  | Name of Person  |   |
|                 |               | Disebetta                                    | Settles<br>Firm/Company   |   |
|                 |               | 2750 NE 183 STREET AP                        |   | ·   |
|                 |               |  | Address   |   |
|                 |               | AVENTURA, FL 33160                           |   |   |
|                 |               |  | City/State and Zip Code   | <del></del>   |
|                 |               | E-mail address: (t                           | to be used for future annual report notif                           | ication)  |
| For further inf | ormation co   | ncerning this matter, please ca              | ill:  |   |
| ELISABETTA      |               |  | 786 302-7865  |   |
|                 | Name of       | Person                                       | Area Code Daytime   | e Telephone Number  |
| Enclosed is a   | check for the | e following amount:                          |   |   |
| ■ \$25.00 Fil   | ing Fee       | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |

MAILING ADDRESS:

TO!

**Registration Section** 

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

| FERRARI GROUP   | , LLC  |                          |
|---|--|--------------------------|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited l  | iny as it now appears on our records.)<br>Liability Company) |                          |
| The Articles of Organization for this Limited Liability Company   | were filed on 06/03/2013                                     | and assigned             |
| Torida document number L13000079411   |  |                          |
| his amendment is submitted to amend the following:  |  |                          |
| a. If amending name, enter the new name of the limited liab   | ility company here:  |                          |
| he new name must be distinguishable and contain the words "Limited Liabi  | lity Company," the designation "LLC" or t                    | he abbreviation "L.L.C." |
| nter new principal offices address, if applicable:  |  |                          |
| Principal office address MUST BE A STREET ADDRESS)  |  | VISE VISE                |
|   |  | APR SECRE                |
|   | ·  | 30 FAR                   |
| nter new mailing address, if applicable:  |  |                          |
| Mailing address MAY BE A POST OFFICE BOX)   |  | - ROS                    |
| Halling dudiess MAT DE ATOST OFFICE BOAT  |  | <b>29</b>                |
| 3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her |  | iter the name of the     |
| Name of New Registered Agent:   |  |                          |
| New Registered Office Address:  |  |                          |
|   | Enter Florida street address                                 |                          |
|   | , Florid   |                          |
|   | 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.

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:

| MGR =  | Manager    |        |
|--------|------------|--------|
| AMBR = | Authorized | Member |

| <u>Title</u> | <u>Name</u>        | Address                               | Type of Action |
|--------------|--------------------|---------------------------------------|----------------|
| MGRM         | ELISABETTA SERRANO | 2750 NE 183 STREET APT 607            |                |
|              |                    | AVENTURA, FL 33160                    | ■ Remove       |
|              |                    |                                       | ☐ Change       |
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| ffective date, if other than the                           | date of filing: 04/24/2018  | (optional)  |                           |
| an effective date is listed, the date mus                  | st be specific and cannot be prior to date of fi<br>ock does not meet the applicable statut | iling or more than 90 days after filing.) Pursuant to 6 ory filing requirements, this date will not be li |                           |
| e record specifies a delayed<br>The 90th day after the rec |   | ective time, at 12:01 a.m. on the ear   | lier of:                  |
| APRIL 24   | , 2018  |   |                           |
| Elisa  | h & Tank  | sentative of a member   |                           |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00