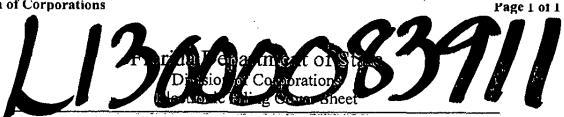
Division of Corporations



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(((H13000188640 3)))



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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : AVILA RODRIGUEZ HERNANDEZ MENA & FERRI LLP

Account Number : I20070000136 Phone

: (305)779-3564

Fax Number

: (305)779-3561

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

.Email Address: LC AMND/RESTATE/CORRECT OR M/MG RESIGN တ် ROFEVIR VENTURES LLC Certificate of Status 0 **A**US 26 Certified Copy 0 Page Count 03 Estimated Charge \$25.00

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FAX AUDIT NO. H130000188640 3

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

ROFEVIR VEN		1: \
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)	<u>us.</u> ;
The Articles of Organization for this Limited Liability Company was Florida document number <u>L13000083911</u> .	vere filed on June 11, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the design	ation "LLC" or the abbreviation
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)		2018 AUG 26 RECRETARY RALLANASSE
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records,	enter the name of the news
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
	, Flor	
	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 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

Page 1 of 3

FAX AUDIT NO. H13000188640 3

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	Name	Address	Type of Action
MGRM	Gold Standard Business Corp.	9737 NW 44 Street, Ste 384	Add
		Doral, FL 33178	Remove
			Add
			Add Remove
			Zenta Aug 26 LAL EN HAUG 26 LAL EN HAUG 26 LAL EN HAUG 26
			6 AHIO: 18 Y OF STARTING SEE FLOREDA
			Remove
·			Add
FAX AUDI	T NO. H13000188640 3	2.62	

FAX AUDIT NO.	H13000188640 3
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	nformation, enter change(s) here: (Attach additional sheets, if necessary.)
	1
A	2012
August 23	2013
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Carlos Gil

Page 3 of 3

Filing Fee: \$25.00

2019 AUG 26 AM 10: 18
SECRETARY OF STATE
FALL AHASSEE F. STATE