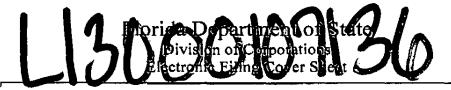
Division of Corporations

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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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VARGAS, PIEDRA & CO.

Account Number : I20070000148

: (305)671-0003 Phone

: (305)671-6263 Fax Number

Enter 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 **GLASGOW HOLDINGS LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

NOV 1 7 2016_{1 1/14/2016}

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLASGOW HOLDINGS LLC	·				
(Name of the Limited I	inbility Compuny as it now appears on our reco forida Limited Liability Company)	rds.)			
The Articles of Organization for this Limited Liabi	lity Company were filed on 7-30-2013	and assigned			
Florida document number L13000107136	·				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	<u>limited liability company here</u> :				
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable	±:				
(Principal office address MUST BE A STREET A	DDRESS)				
Enter new mailing address, if applicable:		<u> </u>			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	另			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our recor	ds, enter the name of the new			
	·	FLO ST.			
Name of New Registered Agent:		OS STATE			
New Registered Office Address:					
·	Enter Florida street address				
·	, F	lorida			
	City	Zφ 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
MGR	IGWT HOLDINGS LLC	9100 S. Dadcland Blvd. # 912	
		Miami, Fl 33156	≅ Remove
			☐ Change
AR	ADHM SERVICES LLC	9100 S. Dadeland Blvd. #912	Add
		Miaml, FL 33156	D Remove
			Change
		<u></u>	□ Remove
	·		☐ Change
			SECRETARIAN NO.
			TE D
			T> U1 □ Remove
			Change
			□ Add
			Remove
			Change

). If amending any other i	nformation, enter c	:hange(s) here:	(Attach addition	al sheets, if necessar	y.)	
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Effective date, if other th	an the date of filing	g:		(optional)	E S	
If an effective date is listed, the Note: If the date inserted is document's effective date of	n this block does not m	neet the applicabl	date of filing or more e statutory filing re	than 90 days after filing; equirements, this date	Pusspail to 605 will the List	as th
ne record specifies a d The 90th day after t	elayed effective d ne record is filed.	late, but not a	in effective tim	e, at 12:01 a.m. (on the earlie	er of:
Dated November 11	;	2016				
	Significant of a m	nember or authoriz	ed representative of a	member		
	Aurelio A	. Picdra/AR				
···· <u>···</u>		Typed or printed n	sinc of signee			

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