L13000115522

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| (Busin | ness Entity Name) |
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| Certified Copies | Certificates of Status |
| Special Instructions to Fili | ing Officer: |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADMATY

| AKIMA I I | | |
|---|--|---|
| (<u>Name of the Limited Liabili</u> (A Florida | ity Company as it now appears or a Limited Liability Company) | our records.) |
| The Articles of Organization for this Limited Liability Florida document number L13000115522 | - | |
| This amendment is submitted to amend the following: | | 5 |
| A. If amending name, enter the new name of the lin | mited liability company here: | Fig. 2 |
| , | | 240; F |
| The new name must be distinguishable and end with the w "L.L.C." | ords "Limited Liability Company," | the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | DRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office ad | | records, enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter 1 | Florida street address |
| • | | . Florida |
| | City | Zip Code |
| No. Destate a Access to the control of the control | . 3. 4 4 | |

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

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|----------------------|----------------|
| MGRM | Deborah Cruce | 655 39th Avenue | Add |
| | | Vero Beach, FL 32968 | Remove |
| | | | |
| | | | Remove -5 |
| | | | Remove |
| | | | — Add |
| | | | Remove |
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| D. If amendi | ng any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|--------------|---|
| | |
| | • |
| | |
| ——— Dated | September 4 2013 |
| Zaied | 1 AN Vento |
| - | Signature of a member or authorized representative of a member Timothy Nickler |
| - | Typed or printed name of signee |

Page 3 of 3

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