| Director of Coporator Director of Coporator Florida Department of State Division of Corporations Electronic Filing Cover Sheet | P. | of 2 |
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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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| Note: DO NOT hit the REFRESH/RELOAD button on your browser from the page. Doing so will generate another cover sheet. | | |
| To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591 | AM 8: 52 | ð |
| <pre>**Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.** Email Address:</pre> | ure | |
| 98 ELLC AMND/RESTATE/CORRECT OR M/MG RESIGN HUGO & VICTOR US LLC 100 100 100 1 | - | |
| L Burch FEB 1 Electronic Filing Menu Corporate Filing Menu Help | - 7 2014 | |

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| ARTICLE | ES OF AMENDMENT TO | | | |
| ARTICLE | S OF ORGANIZATION | | | |
| | OF | | | |
| Hugo & Victor US LLC | | | | |
| Inter <u>Destmiliant State</u>) Dirold A) | ity Company as it now appears on our records a Limited Liability Company) | | | |
| The Articles of Organization for this Limited Liability C Florida document number <u>L13000140135</u> | Company were filed on 12/02/2013 | and assigned | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the lim | ited lightlity company here: | | | |
| v and a number of the second s | · · | | | |
| The new name must be distinguishable and end with the words "Li | mited Liebility Company," the designation "LLC | " or the abbreviation "L.L.C." | | |
| Enter new principal offices address, if applicable: | | <u></u> | | |
| (Principal office address MUST BE A STREET ADD) | RESS) | | | |
| · | | | | |
| Eater new mailing address, if applicable: | | • | | |
| Mailing address MAY BE A POST OFFICE BOX | | | | |
| / | | | | |
| B. If amending the registered agent and/or regis registered agent and/or the new registered office add | | onter the name of the new | | |
| Name of New Remistered Agent: | | | | |
| New Registered Office Address: | | % | | |
| | Smor Florida street address | Bnor Florida street address | | |
| | Flor | rida Zio Code | | |
| New Registered Arent's Signature, if changing Registere | • • | | | |

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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 affice 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 Actors

Page 1 of 3 -

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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| AMBR = AI | nhorized Member | • , . | |
|-----------|---------------------------------------|-----------------------|----------------|
| Title | Name | Address | Type of Action |
| MGR | Blanc, Sylvain | 1220 Collins Avenue | |
| | | Miami Beach, FL 33139 | Remove |
| MGR | Pouget, Hugues | 1220 Collins Avenue | [] Add |
| · . | , | Miami Beach, FL 3313 | Remove |
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| | Page | 2 of 3 | |

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D. If amonding any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated February 6 2014 Signatury of a member grandborized representative of a member Cedric Aumonier Typed or printed same of signed • SECRETARY OF STATE 14 FEB 14 AM 8: 52 년 MCI 승규 Π Page 3 of 3 i.

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Filing Fee: \$25.00