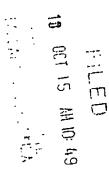
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## **COVER LETTER**

	Registration Se Division of Cor			
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SUBJEC	TT:		ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Victor K. Rones, Esq.		
			Name of Person	
		Law Offices of Victor K. F	Rones P.A.	
			Firm/Company	<del></del>
		16105 NE 18 Avenue		
			Address	
		North Miami Beach, Florid	ia 33162	
			City/State and Zip Code	
		vrones@victorkronespa.com		
		E-mail address: (	to be used for future annual report notif	ication)
For furth	ner information c	oncerning this matter, please ca	all:	
Victor b	C. Rones		305 945-6522 at ()	
	Name o	f Person	Area Code Daytimo	r Telephone Number
Enclosed	l is a check for th	ne following amount:		
<b>■</b> \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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

	ALU, LLC	
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Compar Florida document number $\frac{L13000149577}{L13000149577}$	ny were filed on October 21, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ibility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADDRESS)		
		王
Enter new mailing address, if applicable:		Q
(Mailing address MAY BE A POST OFFICE BOX)		5
1		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address ho		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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
MGR	Pierre L. Castro	16105 NE 18 Avenue, North Miami Beach, Florida	
			☐ Remove
			Change
MGR	Luis A. Castro		□ Add
		11136 SW 71 Lane Miami, Fla 33173-2115	<b>≡</b> Remove
			Change Change
			OAdd S
			Remove HO 5
			Change 59
			🗆 Add
		<u> </u>	□ Remove
			Change
<del></del>			Add
			Remove
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Effective date, if other than t	October 1, 2018 he date of filing: hust be specific and cannot be prior to date of filing or more than 90	(optional)
If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiren	days after filing.) Pursuant to 605.0207 (3 nents, this date will not be listed as th
ne record specifies a delar The 90th day after the r	red effective date, but not an effective time, at ecord is filed.	12:01 a.m. on the earlier of:
October 1	2018	
izateti	F 11.01	
	Part Wast	- there
	Signature of a member of authorized representative of a memb	er
;	ais A. Castro	

Page 3 of 3

Filing Fee: \$25.00