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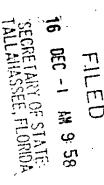
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COVER LETTER

	Registration Se Division of Cor			
CHID HEZ		esearch Institute ,LLC		
SUBJEC		Name of Lim	ited Liability Gompany	
		Amendment and fee(s) are sub	, and the second se	
		Yaquelin Rodrigue	,	
		***************************************	Name of Person	
		Cordova Research Institute	e J.L.C	
			, Firm/Company	
		7815 Coral Way,Suite 103		
			Address	
		Miami,Florida,33155		TAL SE
			City/State and Zip Code	三
		yrodriguez@cordovari.com F-mail address: (to be used for future annual report notification)	
For furth	ner information c	oncerning this matter, please c		
Yaqueli	in Rodriguez		786 554-2254	
	Name o	f Person	at () Area Code Daytime Teleph	ione Number 55
Enclosed	d is a check for th	ne following amount:		
	.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & C Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIER AD Registration Section Division of Corporations Clifton Building	DDRESS:

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cordova Research Institute,LLC						
(Name of the Lim	ted Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ords.)			
The Articles of Organization for this Limited I	Liability Company	were filed on 01/21/2014	and assigned			
Torida document number 1.14000010704	*					
his amendment is submitted to amend the fol	lowing:					
a. If amending name, enter the new name of	of the limited liab	ility company here:				
N/A						
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."			
inter new principal offices address, if appli	cable:					
Principal office address MUST BE A STRE		7815 Coral Way Suite 103				
	41 1100 NGA7	Miami,Florida ,33155				
inter new mailing address, if applicable:		same				
Mailing address MAY BE A POST OFFICE	BOX)					
. If any discountry the						
 If amending the registered agent and egistered agent and/or the new registered or 			rds, enter the name of the ne			
		- -				
Name of New Registered Agent:	Yaquelin Rodr	iguez				
New Registered Office Address:	7815 Coral Wa	·	draws m. a			
		Enter Florida street ado	dress PST 49			
	Miami	· · · · · · · · · · · · · · · · · · ·	Florida 33155			
		City	the Code CO			

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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR= Manager AMBR= Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Migdalia Cordova	7815 Coral Way Suite 103	□ Add
		Miami Florida ,33155	Remove
			Change
			Remove
			
		·	☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			- Tanger 1
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