

Florida Department of State

Division of Corporations

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Division of Corporations

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TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TORTINIERE LLC**

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K. SALY

JUL 28 2017

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TORTINIERE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 1/21/2014 and assigned
Florida document number L14000011268

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR.	TORTINIERE CORP.	C/O 2275 BISCAYNE BLVD	<input type="checkbox"/> Add
		SUITE 1	<input checked="" type="checkbox"/> Remove
		MIAMI, FL. 33137	<input type="checkbox"/> Change
MGR.	JORGE HORACIO MANFREDI	C/O 21 S.W. 15 ROAD	<input checked="" type="checkbox"/> Add
		SUITE 200	<input type="checkbox"/> Remove
		MIAMI, FL. 33129	<input type="checkbox"/> Change
MGR.	MARCELA VALERIA CAGEAO	C/O 21 S.W. 15 ROAD	<input checked="" type="checkbox"/> Add
		SUITE 200	<input type="checkbox"/> Remove
		MIAMI, FL. 33129	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Dated _____ JULY 26 2017

JORGE HORACIO MANFREDI

Typed or printed name of signee