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D. BRUCE

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF ORGANIZA

₹ .	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Composition	any were filed on $01-23-14$ and assigned
Florida document number	<u>2</u>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited 1	iability company here:
The new name must be distinguishable and end with the words "L "L.L.C."	limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS	
	S. S
	المارية عدد المارية ال
Enter new mailing address, if applicable:	
Malling address MAY BE A POST OFFICE BOX)	OF TO
B. If amending the registered agent aud/or registered registered agent and/or the new registered office address to	office address on our records, enter the name of the new
Name of New Registered Agent: Gonza	zalo Gonzalez
New Registered Office Address: 790	O NW 33 TH STREET. STELL
Holly	Enter Florida street address WOOD Florida 33024
	City Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:
the provisions of all statutes relative to the proper and co accept the obligations of my position as registered agent	agree to act in this capacity. I further agree to comply with mplete performance of my duties, and I am familiar with and as provided for in Chapter 608, F.S. Or, if this document is lice address, I hereby confirm that the limited liability

If Changing Registered Agents Signature of New Registered Agent
Page 1 of 2

company has been notified in writing of this change.

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:

	Manager = Managing Member		
Title	Name	Address	Type of Action
<u> </u>	Rossana Ponfiles		Add Remove
			Add Remove
			Add Remove
		·	Add Remove
			Add
			2014 MAR
			Remove
.D. If an	nending any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	AM IO: 10 OF STATE FILDERD
			_ _
. •			_
Dated _	March 20th, 20	014/	_
,			**
	Conzalo (or authorized representative of a member OVERED or printed name of signee	<u>.</u> .

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