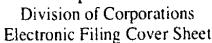
## Florida Department of State



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053 : (561)694-8107 Phone

Fax Number : (561)694-1639

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN S.P.A.R. US, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S.P.A.R. US, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 01/27/2014	and assigned	
Florida document number L14000014557			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
BVB Trade LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		· <del></del>	
(Principal office address MUST BE A STREET ADDRESS)			
· · · · · · · · · · · · · · · · · · ·			
		202 SE	
Enter new mailing address, if applicable:		2020 HN SECRE	
(Mailing address MAY BE A POST OFFICE BOX)		전당 🦰	
Muning address MAT DE ATOST CTTTCS BOTH		က်ကြီး ယ	Ī
		A.	} }
B. If amending the registered agent and/or registered office	address on our records, enter the na	me of the new regi	<u>ister</u>
agent and/or the new registered office address here:		37 NE NE	
Name of New Registered Agent:			
New Registered Office Address:			
tve wite gistered syrines required.	Enter Florida street address		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and Lan provided for in Chapter 605, F.S. O	n familiar with and Fr, if this document	a

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			Change
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		and the second s	Remove
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Note: If	date, if other than the ive date is listed, the date must the date inserted in this blot's effective date on the De	ck does not meet the	e applicable statut	(op ling or more than 90 days at ory filing requirements, t	otional) ter filing.) Pursuant to 605.020 his date will not be listed as
e record rd is filed	pecifies a delayed effective	date, but not an effe	ective time, at 12:	) I a.m. on the earlier of:	(b) The 90th day after the
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Dated	Ken		· · · · · · · · · · · · · · · · · · ·		
		Signature of a member	or authorized repre	sentative of a member	

Filing Fee: \$25.00