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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GOTO E

: GOTO ENTERPRISES LLC

Account Number : I20160000055

: (954)369-4444

Phone Fax Number

: (954)369-4446

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

Email Address:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DIRECT STONE USA LLC

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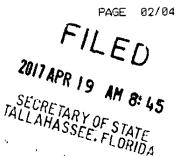
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



Direct Stone USA LLC

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

he Articles of Organization for this Limited Liability Co	ompany were filed on 02/07/2014	and assigned
orida document number L14000021580	_'	
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limit	ed liability company bere:	
olid Stone FM LLC		
e new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office add <u>ress MUST BE A STREET ADDR</u> E	ESS)	
nter new mailing address, if applicable:		·
Mailing address MAY BE A POST OFFICE BOX)		
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<u> Aailing address MAY BE A POST OFFICE BOX)</u>		
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. If amending the registered agent and/or registe	ered office address on our rec	ords, enter the name of th
. If amending the registered agent and/or registe	ered office address on our rec	ords, <u>enter the name of th</u>
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If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:	ered office address on our rec	ords, <u>enter the name of th</u>
. If amending the registered agent and/or registogistered agent and/or the new registered office addre	ered office address on our rec	
If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:	ered office address on our recess here: Enter Florida street o	

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

19543694446

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 = N $AMBR = N$	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	F:
The	90th day after the record is filed.	
ated .	APRIL, 19, 2017.	
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