

05/01/2015

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CLARA GIRALDO P.A.

PAGE 01

Florida Department of State
Division of Corporations
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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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3 MAX, LLC

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CLARA GIRALDO
FALAHASSET, FLORIDA

K. SALY
EXAMINER
MAY - 4 2015

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

3 MAX LLC

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

The Articles of Organization for this Limited Liability Company were filed on 4/22/2014 and assigned
Florida document number L14000065679.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

JUAN CARLOS HOLGUIN

New Registered Office Address:

7245 NW 44 STREET

Enter Florida street address

MIAMI

City

Florida

33166

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	LUIS HOLGUIN	7245 NW 44 STREET	<input type="checkbox"/> Add
		MIAMI FL 33166	<input checked="" type="checkbox"/> Remove

MGR	CESAR AUGUSTO HOLGUIN	7245 NW 44 ST	<input type="checkbox"/> Add
		MIAMI FL 33166	<input type="checkbox"/> Remove

MGR	JUAN CARLOS HOLGUIN	7245 NW 44 ST	<input checked="" type="checkbox"/> Add
		MIAMI FL 33166	<input type="checkbox"/> Remove

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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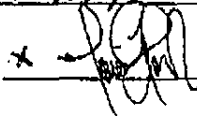
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

MR: LUIS HOLGUIN - 7245 NW 44 ST
DELETE: MIAMI FL 33166.

ADD: JUAN CARLOS HOLGUIN - MR.
7245 NW 44 ST MIAMI FL 33166.

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MAY 1, 2015.

x 

Signature of a member or authorized representative of a member

LUIS HOLGUIN.
Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA