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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CLARA GIRALDO, P.A.

Account Number : I19990000017

Phone

: (305)485-9300

Fax Number

: (305)485-1098

**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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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

(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 05/21/2014 Fund assigned Florida document number 4/400083006
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" L.C." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Principal office address MUST BE A STREET ADDRESS) HOLLYWOOD, F. 3300
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX Mailing address MAY BE A POST OFFICE BOX Hollywood, Fl 33000
3. If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here:
Name of New Registered Agent: New Registered Office Address: Alejando (suintero) Alejando (suintero) Blue 32 Hellywood (Blue 306) Enter Florida street address Hollywood , Florida 33020
New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as ragistered 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 Yew Registered Agent

Page 1 of 3

CLARA GIRALDO P.A. 4080 SW 84 AVENUE SUITE C MIANII, FL 33155 PH.: |305) 485-9300

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 = 1	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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I	1	0 14850NW447HAVE #205 Opelocka, Fl33064	Remove
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J		O 2632 Hollywood Blvd. Suite 306	🗆 Remove
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record specifies a	delayed effective da	ate, but not an	effective time,	at 12:01, a.m. c	on the earlier of
The 90th day after	the record is filed.				
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CLARA GIRALDO P.A. 4080 SW 84 AVENUE SUITE C MIAME, FL 33155 PH.: (305) 485-9300