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COVER LETTER

то:	Registrațion Se Division of Cor	ction porations	*	:
cun ie	RUMM US	A LLC .		
SUBJEC	.1; <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	_	
		STEPHANIE PADLY, ES	Q.	
			Name of Person	
		PADLY & ASSOCIATES	PA	
			Firm/Company	
		1300 3RD STREET SOUT	TH SUITE 302A	
			Address	
		NAPLES, FLORIDA 3410	2	
			City/State and Zip Code	
		SPADLY@239LAWYER.C	•	
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information co	oncerning this matter, please ca	all:	
STEPHA	ANIE PADLY, E	SQ.	239 963-6043	
	Name of	Person		e Telephone Number
Enclosed	l is a check for th	e following amount:		
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL-32	enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2815 OCT 23 AM II: 33

RUMM USA LLC

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(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 06/13/2014 and assigned Florida document number L14000095540 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.L.C." Enter new principal offices address, if applicable: 3510 KRAFT ROAD SUITE 200 (Principal office address MUST BE A STREET ADDRESS) NAPLES, FLORIDA 34105 3510 KRAFT ROAD SUITE 200 Enter new mailing address, if applicable: NAPLES, FLORIDA 34105 (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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = M $AMBR = A$	GR = Manager MBR = Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
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Filing Fee: \$25.00