## Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 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.\*\*

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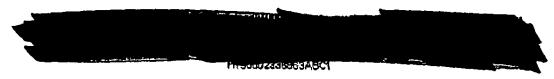
Division of Corporations

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Email	Address	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lia			
(A FIG	bility Company as it now appears on rida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability  Plorida document number L14000101460	y Company were filed on 06/24/	2014	and assigned
This amendment is submitted to amend the following	,. ,•		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the design	nation "LLC" or the	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE BOX)			**************************************
		ir records, <u>ente</u> i	the name of the n
	ddress here:		the name of the n
Name of New Registered Agent:			the name of the n
Name of New Registered Agent:	ddress here:		
Name of New Registered Agent:  New Registered Office Address:	Enter Florida :	Street address	the name of the n
, , , , , , , , , , , , , , , , , , ,	City  ered Agent; ent and agree to act in this caped complete performance of my d agent as provided for in Chapered office address, I hereby c	Florida  acity. I further at duties, and I am pter 605, F.S. Or	Zip Code  gree to comply with the familiar with and the first document is
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Register for the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registered ages to the proper and the second proper and the second proper and the registered being filed to merely reflect a change in the registered ages.	City  ered Agent; ent and agree to act in this caped complete performance of my d agent as provided for in Chapered office address, I hereby c	prices address  Florida  acity. I further a duties, and I am onter 605, F.S. Or onfirm that the light acity is a second to the light acity in the light acity is a second to the light acity in the light acity is a second to the light acity in the light acity is a second to the light acity in the light acity is a second to the light acity in the light acity is a second to the light acity in t	Zip Code  gree to comply with the familiar with and the first document is mited liability

09/30/2015 15:24

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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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	JEFFERY HOYOS	315 \$ BISCAYNE BLVD	Add
	-	4TH FLOOR	☐ Remove
		MIAMI, FL 33131	☐ Change
			□ Add
			□ Remove
			□ Add
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	on, enter change(s) here: (Attach additiona	a sneets, y necessury.)
		<del></del>
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fective date, if other than the d	ate of filing:	(optional)
in effective date is listed, the date must b nter. If the date inserted in this bloc	ate of filing:	then 90 days after filing.) Pursuant to 605.020' quirements, this date will not be listed as
cument's effective date on the Dep	artment of State's records.	The second secon
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record specifies a delayed ( The 90th day after the recor	effective date, but not an effective timed is filed.	e, at 12:01 a.m. on the earlier o
September 29th		
tod September 29th	2015	
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Si	gnature of a member or authorized representative of a	a member
V	•	
Jessica Morales, Attorney	•	28 S S S S S S S S S S S S S S S S S S S
y	in Fact	28 S S S S S S S S S S S S S S S S S S S
y	in Fact	MR SEP 2A SECRLIARY C
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