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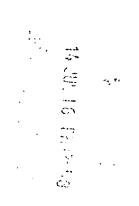
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Rite Touch Au	HO GIGSS LLC			
(Name of the Limited Liability Compa (A Florida Limited I	= · •		-	
The Articles of Organization for this Limited Liability Company Florida document numberL / 4000/02422	were filed on June 26th 20	<u>/ 4</u> and	assigne	ed .
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviatio	n "L.L.C	1 39
Enter new principal offices address, if applicable:	22109 U.S. HWY 19	N_		
(Principal office address MUST BE A STREET ADDRESS)	22109 U.S. Hwy 19 Clear Water FL	33763	5	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the nar	ne of t	the new
Name of New Registered Agent:			(,T)	
New Registered Office Address:				•
	Enter Florida street address , Florida	**	ा जा ७	* p+ -
	City	Zip Co	de	
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.

If Changing Registered Agent, Signature of New Registered Agent

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						
<u>Title</u>	Name	Address	Type of Action			
AMBR	Lisa Pickett	2336 HAZel WOOD LN	I Add			
		Clearunter, FC 33763	Remove			
		2336 HAZEL WOOD LN				
AR	Daniel Pickett	Clennater FC 3370	Add			
			□ Remove			
			Add			
			Remove			
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			. —			
			□ Add			
			□ Remove			
			Add			
			Remove			

If amending any other inform	ation, enter change(s) here: (Attach additional sheets, if necessary.)
	· - · · · · · · · · · · · · · · · · · ·
-	
Effective date, if other than the (The effective date must be specific, can the date this document is filed by the F	e date of filing: June 26th 2014 (optional) anot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State)
Dated July 11th	, <u>2014</u> .
,	Lisa m. Pickett
	Signature of a member or authorized representative of a member
	Lisa M. Pickett
	Typed or printed name of signee

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