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	D. SCOTT MAY 3 2017

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TO: Registr	ration Section		<i>.</i> .				<i>.</i> .
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·		Name of Limit	ed Liability Compa	ny .			<i>.</i>
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The enclosed Ar	rticles of Amendmen	nt and fee(s) are subm	nitted for filing.				
Please return all	correspondence con	cerning this matter to	o the following:				·
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	ARTICLES OF	AMENDMENT	•.
	ADTICLES OF C	U DRGANIZATION	
		DF	• • • • •
	Clearco Laborat	tories LLC	· ·
	(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
	The Articles of Organization for this Limited Liability Company Florida document number $\underline{L14000107612}$	were filed on $\frac{7/17/14}{}$ and assigned	· · · · · · · · · · · · · · · · · · ·
1.0	This amendment is submitted to amend the following:		
416	A. If amending name, enter the new name of the limited liab	ility company here:	••••
			· · · ·
	The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.IC."	_
	Enter new principal offices address, if applicable:	132 W. McNab Road	
	(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 3306	0.
			····· .
	Enter new mailing address, if applicable:	132 W. McNab Road	
	(Mailing address MAY BE A POST OFFICE BOX)	Pompano Beach, FL 3306	00
			· ·
, la	· · · · ·		<u> </u>
1/u	B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		new
	Name of New Registered Agent:	· · ·	· .
	New Registered Office Address:	TAL	
		Enter Florida street address	
		, Florida	
	New Darkstored Agent's Signature if the same Desistand Agents	City Code	
	New Registered Agent's Signature, if changing Registered Agent:	67 R	
	I hereby accept the appointment as registered agent and agent provisions of all statutes relative to the proper and complete		1 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

Page 1 of 3

If smending 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 **Type of Action** Title Name Address 132 W. Mc Nab Road DAdd Augustine J. CROCCO MGR Pompania Beach, FL 33060 D Remove Change Paula Ferrante AMBR 132 W. Mc Nab Road XAdd Pompano Beach, FL 33060 BREMOVE Change AMBR Nazaret Andekian 132 W. McNab Road Kada Pompanie Beach, FL 33060 BREMOVE Change Augustine J. CROCCO AMBR 132 W. McNab Road Add Pompano Blach FL 3300 I Remove □ Change Remove ED Chank Add C Remove □ Change

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Filing Fee: \$25.00

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