

Oct 10 14 01:58

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L14000113324

Florida Department of State
Division of Corporations
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(((H14000238565 3)))



H140002385653ABC1

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (305) 675-2811

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FALL ARMOSE, FLORIDA

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MENSTONE LLC

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

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N. O'Quinn

OCT 13 2014

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2014 OCT 10 AM 9:26

SECRETARY OF STATE
H14000238565/3
ALLAHOUSSEIN, FLORES

MENSTONE LLC

(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 07/17/2014 and assigned
Florida document number L14000113324:

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

626 NE 36TH STREETOAKLAND PARK, FLORIDA 33334

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

626 NE 36TH STREETOAKLAND PARK, FLORIDA 33334

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:

626 NE 36TH STREET

Enter Florida street address

OAKLAND PARK

City

Florida33334

Zip Code

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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	EMMANUEL ACEVEDO	280 NW 32ND CT	<input type="checkbox"/> Add
		OAKLAND PARK, FL 33309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

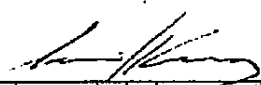
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THE ADDRESS FOR AMBR: AMILCAR BARROS
IS HEREBY CHANGED TO 626 NE 36TH STREET
OAKLAND PARK, FLORIDA 33334

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated OCTOBER 8TH, 2014



Signature of a member or authorized representative of a member

AMILCAR BARROS

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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