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COVER LETTER

TO: **Registration Section Division of Corporations** LC SUBJECT: Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

PLATONS at (9/1) 882-2989 Name of Person Area Code Davrime Telembona Number SAV2

Enclosed is a check for the following amount:

2 \$25.00 Filing Fee

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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)

MAILANG ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taflahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2664 Executive Center Circle Tallahassee, FL 32304

Florida document number	ARTICLES OF AMENDMENT	
OF F Second Limited Liability Company, as it new appears on our records.) (Mernal Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on OR/OC/LO14_ and assigned Florida document number L14000120338		
FP SEALINGES_LLLC INDURE of the Limited Liability Company as in new apports on our records. (Mindual Limitud Liability Company) The Articles of Organization for this Limited Liability Company were filed on OR/CO/2014_ and assigned Florida document number L1405612038. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability Company." the designation "LLC" or the abbreviation "LLC" Enter new principal office address, if applicable: (Principal office address, if applicable: (Mailing address, if applicable: (Mailing address, if applicable: Mane of New Registered agent and/or registered office address on our records, enter the name of the filer address here: New Registered Agent: New Registered Office Address: Enter Florida urvet address		
Florida document number <u>L14006121338</u> . This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liability company bere</u> : The new name must be distinguishable and contain the words "Limited Liability Company." the designation "L1.C" or the abbreviation "L1.C." Enter new principal offices address, if applicable: (Principal office address. if applicable: (Principal office address. if applicable: (Mailing address. MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the file address here</u> : Name of New Registered Agent: New Registered Office Address: Enter Florida stree address Florida stree address	FP SERVICES LLC (Nume of the Limited Liability Company as it new appears on our records.)	
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.LC." Enter new principal offices address, if applicable: (Principal office address, MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 file office address here: Name of New Registered Agent: Name, of New Registered Agent: Name, of New Registered Agent: Enter Florida street address:		
A. If amending name, <u>enter the new name of the limited liability company here</u> : The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the flew</u> B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the flew</u> Name of New Registered Agent: New Registered Office Address: Enter Florida street address	·	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address, if applicable: (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 free registered agent and/or registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	A. If amending name, enter the new name of the limited liability company here:	
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(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 fiew frequence address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
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Name of New Registered Agent: Image: Comparison of the new registered Agent: Name of New Registered Agent: Image: Comparison of the new registered Agent: New Registered Office Address: Image: Comparison of the new registered Agent: Enter Florida street address Image: Comparison of the new registered Agent: Florida street address Image: Comparison of the new registered Agent:	(Mailing address MAY BE A POST OFFICE BOX)	
$\rightarrow n, (l)$		1
$\rightarrow n, (j)$	New Registered Office Address:	
$\rightarrow n, (j)$	Enter Florida street address	~
City Zip Code -	City City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	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

Page 1 of 3

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MERM	ULISES CABRENA	Bradouter, FL 3420	É AUG
	DA SILVA	Bradouten, FL 34,20	C Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ctive date, if other than the date of filing:	(untire-1)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(5) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _(Signature of prmember or authorized representative of a member

PLATONIS An

d or printed name of signed

Page 3 of 3

Filing Fee: \$25.00