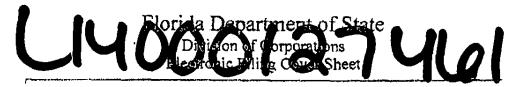
Division of Corporations

Page 1 of 2



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Account Number : I20100000044

Phone : (954)252~0589 Fax Number : (954)320~4555

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Limited County (A Florida Limited Limited Limited Limited I	oy as it now appears on our records.)	And the second s
The Articles of Organization for this Limited Liability Company Florida document mumber L14000127461	ond assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	16 0
The new name must be distinguishable and contain the words 'Limited Liabi	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2 造
(Principal office address MUST BE A SIRERT ADDRESS)	471 SW Port St Lucie Blvd.	<u> – 1988</u>
	Port St. Lucie, FL 34953	र् हिल्
		: 00
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 her		er the pame of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Finrida street aidross	
		•
·	Gity Florida	Zip Code
New Registered Agent's Signature of changing Registered Agent	<u>-</u>	* # *

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 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

Title	Navie	Address	Type of Action
MBR	ASMUL HOQUE	12300 BISCAYNE BLVD	□ Add
		NORTH MIAML FL 33181	■ Remove
			☐ Change
MBR	BADHAN SARKAR	5425 LYONS ROAD	□ Add
		COCONUT CREEK, FL 33073	□ Remove
			■ Change
MGR	SADHAN SARKAR	5425 LYONS ROAD	DAdd
		COCONUT CREEK, FL 33073	□ Remove
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. If amending any other informati	on, enter change(s) be	ere: (Attach addition	al sheets, if necessary.)	
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Define record specifies a delayed b). The 90th day after the reco	effective date, but	rtis.		
	2016			
Dated October 27	6	TAR		16 0CT
	Signature of a member or a	numorized representative	of a ment/ci	<u></u>
Sadhan Sarion	Typed or p	nisted name of signee		
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	P	age 3 of 3		- ×

Filing Fee: \$25.00