Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000202198 3)))



Note: DC NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: FASTKIT CORP

Account Number : I20100000009 Phone

: (305)599-0839

Fax Number

: (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

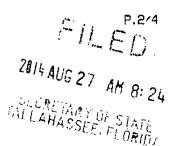
Email	Address:				
	_	<u> </u>	 	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BEST 41, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

K. SALY EXAMINES AUG 28 2014

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Zin Code

TO SEE, FLORING
BEST 41, LLC
(Name of the United Liability Company as it now appears on our records) (A Florida Limited Liability Company)
(N. I. COLOR PRINCES PROPRIES COMPANY)
The Articles of Organization for this Limited Liability Company were filed on AUGUST 14, 2014 and assigned
Florida document number L14000128217
•
This amendment is submitted to amend the following:
A. If amonding name, enter the new name of the limited liability company here:
The state of the s
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BR 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 new
registered agent and/or the new registered office address here:
Name of New Registered Agent:
Navy Devictored OSS to Address.
New Registered Office Address: Enter Florida street address
You wild a

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 Resistered Agent

If amcading the Managers or Authorized Member on our records, enter the title, name, and address of each Manager of Authorized Member being added or removed from our records;

MGR = Manager AMBR = Authorized Member				
Title	Name	Address	Type of Action	
AMBR	CARLOS GFIAUE RUSSEK	365 W LUTGE AVE	= Add	
		BURBANK, CA 91506	П Катюvс	
	······································		Add	
			- Remove	
			Remove Remove Remove Remove	
			Remove	
			🗖 Romave	
	The second secon		D Add /	
			Remove	

D. If	If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)	
			-
			-
			•
Ε.	Effective date, if other than the date of filings	(optional)	•
	(The effective date must be specific, cannot be prior to date of receipt or file the date this document is filed by the Florida Department of State)	ed date and games to more than 90 days after	
	Dated 08/27/2014	m.	
	Signature of Amonocir of August O	ized representative of a member	
	Typed of printer	come of summer	

Page 3 of 3

2814 AUG 27 AM 8: 24