Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Electronic Filing Menu

Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MAKE PRA LUC  |   |
|---|---|
| (Name of the Limited Liability Comp.<br>(A Florida Limited  | any as it now appears on our records.) Liability Company)           |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L14000132750</u>   | were filed on and assigned and assigned                             |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the limited liab   | vility company here:  |
| The new name must be distinguishable and contain the words "Limited Liabi   | lity Company," the designation "L.L.C." or the abbreviation "L.lC." |
| Enter new principal offices address, if applicable:   | 5931 NW 173 Drive   |
| (Principal office address MUST BE A STREET ADDRESS)   | SUITE 9   |
|   | MJAMI FL 33015  |
|   | 13  |
| Enter new mailing address, if applicable:   | 5931 NW (73 Drive   |
| (Mailing address MAY BE A POST OFFICE BOX)  | SUITE 9   |
| · · · · · · · · · · · · · · · · · · ·   | MIAMI FL 33015  |
| B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address: | ffice address on our records, enter the names of the new se:        |
|   | , Florida D   |
|   | City 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

Page 1 of 3

,,

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

| <u>Title</u> | Name                   | <u>Address</u>    | Type of Action |
|--------------|------------------------|-------------------|----------------|
| MGR          | MARIA M DIAZ PEREZ     | 5931 NW 173 Drive |                |
|              |                        | SUITE 9           | □ Remove       |
|              |                        | MIAMI FL 33015    | ■ Change       |
| MGR          | IVAN D MARTINEZ BRACHO | 5931 NW 173 Drive | D Add          |
|              |                        | SUITE 9           | □ Remove       |
|              |                        | MIAMI FL 33015    | ■ Change       |
| MOR          | LEIDA BRACHO           | 5931 NW 173 Drive | [C] Add        |
|              |                        | SUITE 9           | □ Remove       |
|              |                        | MIAMI FL 33015    | B Change       |
|              |                        |                   |                |
|              |                        | A Sec.            | □ Remove       |
|              |                        | ,                 | Change         |
|              |                        |                   | SS Remove      |
|              |                        |                   | A Add          |
|              |                        |                   | □ Remove       |
|              |                        |                   | □ Change       |

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| amending any other information, enter change(s) here: (Attach additional sheets, t   | f necessary.)   |
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| Mortive date if other than the date of filing:   | (optional)  |
| ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day  ote: If the date inserted in this block does not meet the applicable statutory filing requirement ocument's effective date on the Department of State's records. | ys after filing.) Pursuant to 603.02<br>its, this date will not be listed |
| e record specifies a delayed effective date, but not an effective time, at 12. The 90th day after the record is filed.   | ::01 a.m. on the earlier  |
| ated June 9 2017   |   |
| Signature of a member or authorized representative of a member   |   |
| IVAN D MARTINEZ BRACHO  Typed or printed name of signee  |   |

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Filing Fee: \$25.00