Division of Corporations



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLANCO ACCOUNTING I, INC

Account Number : I20100000060

Phone

: (305)828-1148

Fax Number

: (305)828-1709

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

D11	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RUFO THE KANGAROO INTEGRAL CENTER LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Compi (A Florida Limited	any as it now appears on Liability Company)	our records.)			
The Articles of Organization for this Limited Liability Company were filed on 09/29/2014  Florida document number L14000151591					and assigned	
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	the limited liab	ility company here:		•		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designa	ntion "LLC" or the abb	eviation "L	L.C."	
Enter new principal offices address, if applica	able:	SUSANA ROMERO	Z <sub>S</sub>	2		
Principal office address MUST BE A STREE		11300 NW 87 STRE	ET UNIT 125 126	15	··· =	
		HIALEAH GARDEN	IS FL 33018 ₹ [m]	130	17	
			SSE SE	<u> </u>	7	
Enter new mailing address, if applicable:		SUSANA ROMERO	(C)			
Mailing address MAY BE A POST OFFICE I	BOX)	11300 NW 87 STRE	ET UNIT 125,126	- حز حد		
	<del></del>	HIALEAH GARDEN	IS FL 33018	<del>ф.</del>		
			Α	0-		
<ol> <li>If amending the registered agent and/o egistered agent and/or the new registered off</li> </ol>			records, enter the	ię name	of the	
Name of New Registered Agent:	SUSANA ROMERO					
New Registered Office Address:	11300 NW 87 STREET UNIT 125,126					
	Enter Florida street address					
	HIALEAH GA		, Florida _ <sup>3301</sup>	8		
		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.

f 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	IRIS SALVADOR	11300 NW 87 STREET	D Add
		HIALEAH GARDENS FL 33018	■ Remove
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