L14000181904

Florida Department of State
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.

(((H15000044127 3)))

H15000044127 3ABCY

Note: DO 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)617-6282

From:
Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : I20090000045
Phone : (302)645-7400
Fax Number : (302)645-1280

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

Email Address: daniela.vieira@jtcgroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EX INVESTMENTS LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	$30.00

15 FEB 20 AM 10:00 BUREAU OF COMMERCIAL INFORMATION SERVICES

FILED 15 FEB 20 AM 8:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FEB 23 2015

Electronic Filing Menu Corporate Filing Menu Help

(((H15000044127 3)))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

EX Investments LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/24/2014 and assigned Florida document number L14000181904.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

City *Zip Code*

15 FEB 20 AM 8:11

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

(((H15000044127 3)))

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

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	GANESHA OHM HOLDING INVESTMENTS LTD.	AV. DOS FLAMBOYANTS, 155 BL3 AP 102, BARRA DA TIJUCA, RIO DE JANEIRO, NA 22776--070 RJ	☐ Add
			■ Remove
AMBR	GANESHA OHM HOLDING INVESTMENTS LTD.	1001 Brickell Bay Drive, Suite 1202	■ Add
		Miami, Florida FL 33131	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

15 FEB 20 AM 8:11

FILED

(((H15000044127 3)))

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 19 FEBRUARY, 2015.

Signature of a member or authorized representative of a member

LILIANA FERNANDEZ - DIRECTOR
Typed or printed name of signee

Filing Fee: $25.00

FILED
15 FEB 20 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H15000044127 3)))