Florida Department of State Division of Consorations Element of State Please on the Pling Cover Sheet

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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name

: MARTIN ACCOUNTING & TAX SERVICE, INC

Account Number : I20060000012

: (305)826-5886

Fax Number

: (305)722-0535

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

C4437	Address			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REWARDNERS, LLC

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J. HARRIS

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Enter Florida street address	
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•	Zip Code
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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

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	Name	Address	Type of Action
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		WESTON, FL 33327	■ Remove
			[] Change
AMBR	PREM, JUAN L	21 AVE 1-66 ZONA 15 VISTA HE	B Add
		GUATEMALA CITY, GU 00000	□ Remove
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Dated	MAY 21 2015	
	Signature of a number or authorized representative of a member	
	TORGE LAREN ME	
	Typed or printed name of signee	: