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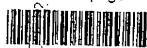
Office DEPOT. Office Viax cover sheet

	number of pages including cover sheet:
	company: <u>FROTECH ALLOY WHEELS</u> from: <u>ALISSON LIMA</u> Thore #: 407-770-0078
	company: FROTECH ALLOY WHEELS from: ALISSON LIMI
	company:
	fax #: \\\ \\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \
	comments: TLEASE USE THE \$25.00 FILLING FFE
	LAAT HAS NOT DEEN USED ONSEPTEMBER 07,2013
	IF THERE ANY FORWARD QUESTIONS PLEASE
•	CALL ME AT 407-779-0938 ALISSON LIMA.

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Taking care of business

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROTECH ALLOY WHEELS REPAIR, LLC	
	pany as it now appears on our records.) [Cinbility Company]
The Articles of Organization for this Limited Liability Company Florida document number L14000184593	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
PRO PROPERTIES INVESTMENTS & RENOVATIONS, LLC	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbraviation "LLC"
Enter new principal offices address, if applicable:	5728 MAJOR BLVD. SUITE 609
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32819
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4630 S. KIRKMAN RD. #24 ORLANDO-FL 32811
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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

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

Title	Name		
AMBR	DAVID SETH COHEN	Address .	Type of Actio
		6312 TAMPA AVENUE TARZANA, CA 91335	<u> </u>
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Tective date, if other than a meffective date is listed, the date in this offer. If the date inscribed in this cument's effective date on the	the date of filing:	2018 (optional) ate of filing or more than 90 days after filing.) Pursuant statutory filing requirements, this date will not be	to 605.0207 (be listed as t
record specifies a delay he 90th day after the re	ed effective date, but not an ecord is filed.	effective time, at 12:01 a.m. on the ϵ	arlier of:
OCTOBER 30	2018		
	1/	- 2	
	Misson T.	Laine	
			
	Signature of a member or authorized	representative of a member	_

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