L15000021006

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SUBJECT:		KY HOLDINGS, LLC						
SUBJECT		Name of Lin						
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please retur	n all correspo	ondence concerning this matter	to the following:					
		GORG M. SASSON						
			Name of Person					
		M&E LUCKY HOLDING	SS, LLC					
			Firm/Company					
	20855 NE 16TH AVE SUITE C 16							
		-	Address					
	NORTH MIAMI BEACH, FL 33179							
			City/State and Zip Code					
		meir@heatswimwear.com		cation)				
		E-mail address: (to be used for future annual report notifi-	cation)				
For further	information c	oncerning this matter, please c	all:	· · · · · · · · · · · · · · · · · · ·				
GORG M.	SASSON		305 652 6131	8: 52 				
	Name o	f Person		Telephone Number				
Enclosed is	a check for th	ne following amount:						
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address: Registration Section			Street Address: Registration Sect	tion				
Registration Section Division of Corporations			Division of Corp					
Р.	O. Box 632	7	The Centre of Ta					
Ta	illahassee, I	FL 32314	2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

M&E LUCKY HOLDINGS, 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 $\frac{01/27/2015}{1}$ and assigned Florida document number L15000021006 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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 registe agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 t 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	MEIRA SASSON	20855 NE 16TH AVE SUITE C16	≘ Add
		NORTH MIAMI BEACH, FL 33179	□Remove
			□ Change
			□Add
			□Remove
			☐Change
			 Add
			☐ Remove
			□ Add
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