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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DELEN ACCOUNTING SERVICES, INC

Account Number : I20120000052

Phone : (305)591-9180

Fax Number

: (305)591-9167

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

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co. (A Florida Linu	mpany as it now appears on e ted Liability Company)	ur records.)	
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This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	iability company here:		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designa	ntion "LLC" or the abbre-	viation "L.f.,C."
Enter new principal offices address, if applicable:	errorrers on the manufacture of the ball of the light of	-	
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Enter new mailing address, if applicable:	pingkaring 1970-ban sapanggapan in .	0.2 0.2	2
(Mailing address MAY BE A POST OFFICE ROX)		<u></u>	
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B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, enter the	
Name of New Registered Agent:	THE RESERVE THE PROPERTY OF TH	ما ( فوق بهرانسیسی و ۱۹ م ۱ ساله معدد مد	
New Registered Office Address:	Enter Florida st	،	
	Enter Florida st	rect address	
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	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

10/20/16 04:36PM

Jelen Accounting Services Inc 305-591-9167

p.03

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		
AMBR	ANDREA AYALA	9807 SW 10138TH AVENUE			
		MIAMI, FL. 33186	PT 0		
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