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.

(((H15000046122 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

Fax Number

: (305)675-5944

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

Fmail	Address:			
	MUUI ESS:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIG WOUFAST ELECTRONICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

H15000046122

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOUFAST ELECTRONICS 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 02/09/2015 and assigned Florida document number L15000024595 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation N/A Enter new principal offices address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS) N/A N/A Enter new mailing address, if applicable: N/A (Myiling address MAY BE A POST OFFICE BOX) N/A R. If amending the registered agent and/or registered office address on our records, cuter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address N/A Florida <u>N/A</u>

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 om familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

H15000046122

If amouding the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member heing added or removed from our records:

Ē	<u>Name</u>	Address	Type of Act
GR	GARCIA, PEDRO	2047 NW 24th Avenue	Add
		Miami, Florida 33142	Rem
		4.8	_
		· · · · · · · · · · · · · · · · · · ·	Add
			Rem
			-
			_ <u> </u>
			_ [] Rem
		A.S.	2015
		P ST	2015FEB 3
	•	SEE.	3 PH
		100 E	
			CO)
			_
			A0
			Ref

PLEASE ADD FEIN AS	
	OF 47-3065374
Dated February 19 2	015
	a Fost Wolferlood
Signature of a men	nher or authorized representative of a member
FEDERICO G. FAST W	OUTERLOOD, AMBR

Page 3 of 3

Filing Fee: \$25.00