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To:

Division of Corporations

fax Number

: (850)617-6383

From:

: MCDONALO HOPKINS CO., PA Account Name

Account Number : 120050000183 Phone

: (561)472-2121

Fax Number

: (561)472-2122

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

cradleys@aol.com Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMD TRUST, LLC

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H210001747833

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AMD Trust, LLC		
(Name of the Line)	ed Linbillity Company as It now as (A Florida Limited Cability Compa	poerie on our records")	<del></del>
The Articles of Organization for this Limited L.			
	mornia combana were prequi	1 03/17/2013	_ and assigned
Florida document number L15000048136	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liability compan	v here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company,"	the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applic			
(Principal office address MUST BE A STREE	TADDRESS)		20 S
			<u></u>
	<del>-</del>		
Enter new mailing address, if applicable:			- 9월 - 표
Mailing address MAY BE A POST OFFICE			
ELECTION OF THE PARTY OF THE PA	<u></u>		
B. U amending the registered agent and/or re	egistered office address on or	ur records, enter the name o	1 the new rectanged
agent and/or the new registered office addres	<u>3 here:</u>		
Name of New Registered Agent:	ALFA MGR, LLC		
New Registered Office Address:	11467 Riverwood Place		
	Enter	Florida street address	
	North Palm Beach	Florida 33408	ı
	Cly		Zip Code
New Registered Agent's Signature, if changing F	legistered 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.

ALFA MGR, LLC

y: Bullerau Sord
If Changing Registered Agent, Signature of New Registered Agent

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## H210001747833

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	<u>Name</u>	Address	Type of Action
MGR	ALFA EQUITIES, LLC	11467 Riverwood Place	
		North Palm Beach, FL 33408	≅R≑move
			Change
MGR	ALFA MGR, LLC	11467 Riverwood Place	<b>≅</b> Add
		North Palm Beach, FL 33-108	□Remove
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