

08/12/16

01:25PM

Jelen Accounting Services Inc

305-591-9167

p.01

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : JELEN 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.****

Email Address: _____

16 AUG 12 AM 9:32

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2016 AUG 12 PM 2:00

CLERK OF COURT
 TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PROMASTER PERFORMANCE LLC

Certificate of Status	0
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AUG 15 2016

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROMASTER PERFORMANCE 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 03/20/2015 and assigned
Florida document number L15000050846

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 "LLC."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

ELOY QUINTANA GUERRA

New Registered Office Address:

9759 NW 44 TERRACE

Enter Florida street address

MIAMI

City

Florida 33178

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

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	JESUS T QUINTANA DUGARTE	9750 NW 44 TERRACE	☐ Add
		MIAMI, FL 33178	☒ Remove
			☐ Change
AMBR	ANA DUGARTE DE QUINTANA	9759 NW 44 TERRACE	☐ Add
		MIAMI, FL 33178	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Remove
			☐ Change

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E. Effective date, if other than the date of filing: _____ (optional)

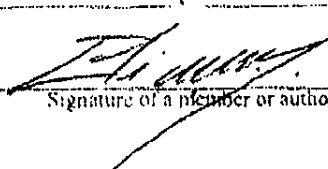
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated AUGUST 12

2016


Signature of a member or authorized representative of a member

Typed or printed name of signee