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From:		
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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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAL GROUP INVESTMENTS, LLC.

Certificate of Status	0
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF SAL GROUP INVESTMENTS, 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 MARCH 31ST, 2015 Florida document number 1.15000056886 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, it applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) 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: ROMAR SPRINGS LLC Name of New Registered Agent: JITEN UNIVERSITY DRISTE 105 New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capualty. 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 603, 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.

CORAL SPRINGS

If Changing Registered Agent, Signature of New Registered Agent

Enter l'Iorida street address

Page 1 of 3

To SUNBIZILC Page 4 of 5

MGR = Manager

AMBR = Authorized Member

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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:

<u>Title</u>	Name	<u>Address</u>	Type of Action
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D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if neces	iscry.)		
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Dated MAY	Maria Signature of a member or authorized representative of a member	TAL:.m	2019 HAY -7	
1	MARIA ARMAS (INCORPORATOR))+ c: (v) <u>m</u> -	AM	; [7]
-	Typed or printed name of signee	<u> </u>	ထ္	
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