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Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CORFIDIO LLC

Certificate of Status	0
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SEP 10 2015

H15000217507

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CORFIDIO 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 MAY 12, 2015 and assigned
Florida document number L15000083489 .

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, 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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JESUS NORIEGA	8530 NW 66TH STREET MIAMI, FL 33166	☐ Add ☒ Remove ☐ Change
MGR	JESUS NORIEGA	8530 NW 66TH STREET MIAMI, FL 33166	☐ Add ☒ Remove ☐ Change
MGR	CARLOS NORIEGA	8530 NW 66TII STREET MIAMI, FL 33166	☐ Add ☒ Remove ☐ Change
MGR	CRISTINA CANCIAN	8530 NW 66TH STREET MIAMI, FL 33166	☒ Add ☐ Remove ☐ Change
AMBR	CRISTINA CANCIAN	8530 NW 66TH STREET MIAMI, FL 33166	☒ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

_____

_____

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E. Effective date, if other than the date of filing: SEPTEMBER 1, 2015 _____ (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 SEPTEMBER 1 _____ 2015 _____

_____
Signature of a member or authorized representative of a member

JESUS NORIEGA

_____
Typed or printed name of signee

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