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TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PT/_/// | | |
|--|---|---|
| (<u>Name of the Limited L</u> (A F | Liability Company as it now appears on our records.) Florida Limited Liability Company) | |
| | | |
| The Articles of Organization for this Limited Liabil | ility Company were filed on $05/20/2015$ and assigned | |
| Florida document number L 150000 8 | fility Company were filed on $\frac{05/20/2015}{89155}$ and assigned | |
| | | |
| This amendment is submitted to amend the following | ing: | |
| A. If amending name, enter the new name of the | ne limited liability company here: | |
| - | A//A | |
| The new name must be distinguishable and contain the words | Is "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." | |
| Enter new principal offices address, if applicable | le: | |
| (Principal office address MUST BE A STREET A | 88 | |
| Trincipal office dualess STOST BL A STREET A | ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BO) | <u> </u> | |
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| | | |
| | registered office address on our records, enter the name of the no | w |
| registered agent and/or the new registered office | e address here; | |
| | | |
| Name of New Registered Agent: | Javier R. Figueredo-Garcia | |
| New Registered Office Address: | Sauler R. Figueredo-Garcia 2908 W. Woodlawn Ave Enter Florida street address | |
| _ | Tanpa , Florida 33607 Zip Code | |
| New Registered Agent's Signature, if changing Regis | | |

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

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 Name **Type of Action** Luis Pena 2215 E. Annie ST DANG Tampa, FL 33612 XRemove P Javier R. Figueredo-Garcia 2908 W. Woodlaun Ave Tampa FL 33607 Remove ☐ Change **□**dd ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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| E. Effective da | ate, if other than the date date is listed, the date must be | te of filing: | annot ho neige to | data of filing as | mass than 00 days | optional) | |
| Note: If the | e date inserted in this block | does not me | et the applicabl | le statutory fil | ing requirements | this date will no | ot be liste |
| document s | effective date on the Depar | tment of Sta | ne s records. | | | | |
| If the record | specifies a delayed ef | fortive da | te but not : | en effective | time at 124 | O 1 am on th | o oarlic |
| | h day after the record | | te, but not a | an enective | tillie, at 12. | or a.m. on m | e earne |
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