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## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ELEVENPROFIT LLC

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		CLES OF AMENDMENT TO LES OF ORGANIZATION OF	H16000119	115 3
		ELEVENPROFIT LLC		
·	(Name of the Limited 1 (A 1	iability Company as it now appears on our re londa Limited Liability Company)	cords.)	_
The Articles of Orga Florida document m	anization for this Limited Liabi	lity Company were filed onJUNE 02,		d assigned
This amendment is a	submitted to amend the following	ng:		
		-		
A. If amending na	me, <u>enter the new name of the</u>	e limited liability company here:		
The new pame must be	dictinguishable and contain the words	"Limited Liability Company," the designation "	"ITC" or the abbreviatio	on ''L [ C.''
	-			
	al offices address, if applicable			
(Principal office ag	<u>dress MUST BE A STREET A</u>	<u>DDRESS)</u>		
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B. If amending t	the registered agent and/or	registered office address on our rec		ame of the n
B. If amending t		registered office address on our rec		
B. If amending t registered agent ar	the registered agent and/or ad/or the new registered office	registered office address on our rec		ame of the n
B. If amending t registered agent ar	the registered agent and/or	registered office address on our rec		ame of the n
B. If amending a registered agent ar <u>Name of Name of </u>	the registered agent and/or ad/or the new registered office	registered office address on our rec address here:	HASSEN CF STA	amed the n
B. If amending to registered agent ar <u>Name of N</u>	the registered agent and/or ad/or the new registered office lew Registered Agent:	registered office address on our rec	HASSEN CF STA	amed the n
B. If amending t registered agent ar <u>Name of N</u>	the registered agent and/or ad/or the new registered office lew Registered Agent:	registered office address on our rec address here:	ddress	amed the n

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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MGR = M	<u>from our records</u> : anager uthorized Member		H160001191 <b>15</b> 3
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CIRO A LEAL-LOPEZ	5021 SANTA CLARA DRIVE	<b>_D</b> Add
		ORLANDO, FL 32837	
			E Change
AMBR	MARIA P LEAL-CARRENO	5021 SANTA CLARA DRIVE	🗆 Add
		ORLANDO, FL 32837	Remove
			Change
AMBR	FELIPE LEAL-CARRENO	5021 SANTA CLARA DRIVE	D Add
		ORLANDO, FL 32837	Remove
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			Remove
			Change
	Da	nge 2 of 3	H16000119115 3

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

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HE EIN FOR THE LLC IS: 47-4182878	
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	(T)

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	MAY 12	2016	
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		Signatore of a member of authorized representative of a member	
		CIRO A LEAL-LOPEZ	
		o Abea or burnen usune pi sillinee	

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