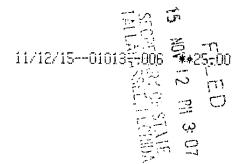
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(Re	questor's Name)	
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COVER LETTER

	istration Seci ision of Corp					
	CARIBBEA	N MASTER LLC				
SUBJECT:		Name of Limi	ited Liability Company			
The enclosed	Articles of A	mendment and fee(s) are subt	mitted for filing.			
Please return	all correspond	dence concerning this matter	to the following:			
		JONATHAN ASERRAF				
			Name of Person			
			Firm/Company		三名 高	
		7950 NW 53RD STREET,	SUITE 337		20 3	۲!
			Address	112.5112	NOV 12	
		MIAMI, FLORIDA 33166				<u>.</u>
		JA@OFFIXSOLUTIONS.C		•	\$ 07 (NIE (ORID);	
		E-mail address: (t	to be used for future annual report notifi	cation)	•	
For further in	formation con	ncerning this matter, please ca	all:			
JONATHAN	I ASERRAF		305 799-1576 at ()			
	Name of I	Person		Telephone Number		
Enclosed is a	check for the	following amount:				
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sertificate of Certified Contact (additional coperations)	of Status & opy	

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

CARIBBEAN MASTER LLC			
(Name of the Limited (A	Liability Compa Florida Limited	i <mark>nv as it now appears on our re</mark> Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number L15000098361	ility Company	were filed on 06/04/2015	and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liab	ility company here:	
	1 ser 1 2 11 1 1 1	Pro Company and Advanced to the Company and th	d L C" and a abburdada w L C "
The new name must be distinguishable and contain the word Enter new principal offices address, if applicab		2930 NW 108 AVENUE	"LLC" of the abbreviation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET_		DORAL, FL 33172	三 强
Enter new mailing address, if applicable:		2930 NW 108 AVENUE	100 mm 10
(Mailing address MAY BE A POST OFFICE BOX)		DORAL, FL 33172	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		e: ANDUSSI	ords, enter the name of the ne
New Registered Office Address:		Enter Florida street ac	dress
	DORAL		, Florida 33172
		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.

CHUS HAD DESIGNATURE 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 = Mánager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Chiandussi Sanchez, Carlos Enrique	8900 NW 35TH LANE Suite 140	
		DORAL, FL 33172	≡ Remove
			Change
MGRM	Sanchez Marquez, Jesus Manuel	8900 NW 35TH LANE Suite 140	
		DORAL, FL 33172	■ Remove
			Change
MGRM	CHIANDUSSI, CARLOS	2930 NW 108 AVENUE	
		DORAL, FL 33172	Remove T
			Change
MGRM	SANCHEZ, JESUS	2930 NW 108 AVENUE	Addo
		DORAL, FL 33172	□ Remove
			□ Change
			Add
			□ Remove
			Add
			Remove
			□ Change

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				三型 命
				7/2 T
				100
				70 to 07
Effective date, if other than the da	ate of filings		(optio	देखे
f an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be price does not meet the applications.	cable statutory fili	more than 90 days after	filing.) Pursuant to 605.020
ne record specifies a delayed e The 90th day after the record		ot an effective	time, at 12:01 a	.m. on the earlier o
DatedNOVEMBER 9TH	, 2015	·		
	•			
CAPLOS CHIAN	gnature of a member or aut	horized representativ	e of a member	

Page 3 of 3

Filing Fee: \$25.00