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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC

Account Number : 120150000089 Phone : (305)444-8800 Fax Number : (305)444-4010

\*\*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 PARACAS HOLDINGS LLC

Certificate of Status	0
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(H16000 1101163)

PARACAS HOLDIN	NGS LLC		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appoint to the company	ears on our records y)	<u> </u>
The Articles of Organization for this Limited Liability Company we Florida document number	ere filed on _	06/22/2015	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	y company	<u>here</u> ;	
The new name must be distinguishable and contain the words "Limited Liability	Company," th	e designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· <u>-</u>	
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
-	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<del></del>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	te address	on our records	enter the name of the new
			Po P
Name of New Registered Agent:			22 -
New Registered Office Address:	Enter l	Florida street addres	gri o
		FI	orida
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		4	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance ovided for i	e of my duties, ar in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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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	Address	Type of Action
MGRM	Maria Del Pilar Herreros	829 Lorca St	Add
		Coral Gables, Florida 33134	□ Remove
		<del> </del>	☐ Change
	•		□ Remove
			Change
			□ Remove
			☐ Change
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			Remove
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ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary	,	
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	tord specifies a delayed effective date, but not an effective time at 12:01 a.m.	on the	a parliar :
The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 90th day after the record is filed.	OII [[][6	
	04-29-2016		
ated			
			<u></u>
	Signature of a member or authorized representative of a member		

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