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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: RC TAX SERVICE HC LLC Account Name

Account Number : 120200000165 : (863)421-0617 Phone

: (407)520-5473 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

amonda arveservices @ amail Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARVE SERVICES LLC

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| | tion Sectio of Corpor | | | | | | | |
| ARV SUBJECT: | /E SERVI | ES LLC | | | | | | |
| | | Ne | me of Limited | Liability Com | peny | | | |
| The enclosed Arti | cles of Am | endment and fee(| s) are submitt | ed for filing. | | | • | |
| Please return all co | orresponde. | nce concerning th | is matter to th | ne following: | : | | | |
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| | <u> </u> | | | Name of Pe | erson | | | |
| | | | AF | RVE SERVI | CES LLC | | | |
| j. | - | | | Firm/Com | pany | | | |
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| | | E-mail | address: (to be | used for futu | rc annual rej | port notificati | ion) | |
| For flirther inform | ation conce | ming this matter | please call: | | | | | |
| JUAN C. ARMA | Н | | | 407 at (| 485-:) | | | |
| | Name of Per | son | | Area (| lode | Daytimo Tel | lephone Number | |
| Enclosed is a chec | k for the fo | llowing amount: | | | | | | |
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4045205473 To:8506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

| | | | Or | |
|------------------------------------|-----------------------|---------------------|---|-----------|
| | | ; 1 | ADVE SERVICEGIA G | |
| | 1 | (Name of the | ARVE SERVICES LLC | |
| | | Charle of the | Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | |
| een | <u>ll</u> | | 09/24/2015 ES | ; |
| | | | ed Liability Company were filed on 08/24/2015 and assigned | |
| Florida documer | it number. | L15000144448 | | : ì |
| This amendment | is submitt | ed to amend the | استن معقد | |
| | | | | |
| A. If amending | name, <u>en</u> | ter the new nai | ne of the limited liability company here: | |
| | | | | |
| The new game mus | be distingui | shable and contain | the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." | |
| Enter new princ | cipal offic | es address, if an | onlicable: | |
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| () rincipal office | 1 | OST DL AGE | ELI ADDICODY | |
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| Enter new mail | ing addre | s, if applicable | | |
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| | | | or registered office address on our records, <u>enter the name of the new register</u> | <u>2d</u> |
| agent and/or th | <u>e new regi</u> | stered office ad | aress nere: | |
| | | | | |
| Name o | of New Re | ristered Agent: | | |
| New R | egistered C | ffice Address: | | |
| | | | Enter Florida street address | |
| | | | , Florida | |
| | | | City Zip Code | |
| New Registered | gent's Sig | nature, if chang | ing Registered Agent: | |
| I hereby accept | the appoi | ntment as regis | tered agent and agree to act in this capacity. I further agree to comply with th | е |
| provisions of al | statutes | elative to the p | roper and complete performance of my duties, and I am familiar with and | |
| | | | registered agent as provided for in Chapter 605, F.S. Or, if this document is | |
| being filed to m company has be | | | the registered office address, I hereby confirm that the limited liability | |
| сотрану наз ов | en noune | w in writing of | ino enunge. | |
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| | | | If Changing Registered Agent, Signature of New Registered Agent | |

| ÈP-01-2021 17:56 From: | 4045205473 | To:8506176383 | Page: 4/5 |
|--|--|-------------------------|--------------------|
| If amending Authorized Person(s) author or removed from our records: MGR = Manager AMBR = Authorized Member | ized to manage, <u>enter the title, na</u> | me, and address of each | person being added |
| Title Name | Address | | Type of Action |
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| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| D. If am | ending | any other | information, c | enter change(s) here: (Attach additional sheets, if necessary.) | |
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| | - | | Sign | Juan Carlos Armas Huttado (Sep.), 2011 13:22 EDI) Inditure of a member or authorized representative of a member | |
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