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Division of Componetions Pax Number (854)617-6381

to.

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Account Number : 120070000185
Figure : 18001494-3146
Fax NAMber : (305)675-2811

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	COMING CL					
(Name of the Limi	ted Liability Compa (A Florida Lunifed L	ny as it now appears op o inbility Compuny)	ur records.)			
The Articles of Organization for this Limited L	ER 27, 2015	_ and assigned				
Florida document number L15000182695	•					
This amendment is submitted to amend the foll	owing:		•			
A. If amending name, enter the new name of	of the limited liabi	lity company here:				
AJK INVESTMENTS, LLC						
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company." the designat	ion "LLC" or the abbro	eviation "L.L.C."		
Enter new principal offices address, if applicable:		1809 S. POWERLINE RD UNIT 101				
(Principal office address MUST BE A STREE	DEERFIELD BEACH, FL 33442					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1809 S. POWERLINE	RD UNIE			
		DEERFIELD BEACH	I, FL 33442上行	in the same of the		
		35.5	2			
			ma ma	7		
B. If amending the registered agent and registered agent and/or the new registered o	or registered of ffice address here	lice address on our	records, enter th	e name of the no		
•		·金		5		
Name of New Registered Agent:	JAMES QUINTANO		W-12			
New Registered Office Address:						
	et address					
	DEERFIELD B	ELD BEACH , F		2		
	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.

If Changing Registered Agent, Signature of New Registered Agent

H17000056326.3 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

<u>Title</u>	Name	Address			Type of Action
ST	DELLINGER, WILLIAM	1809 S. POWERLINE RD UNIT 10	01		🗆 Add
		DEERFIELD BEACH, FL 33442	····		Remove
			·		Change
					D Add
					□ Remove
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				<u>~3</u>	Change
			SECRETARY ALLAHASS	2017 HAR	C Add
	•		ASS	30 1	Remove
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