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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : G & A ACCOUNTING AND TAXES SERVICES,

Account Number : I20120000033

Fax Number

Phone : (305)801-5394 : (786)231-5720

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

Email Address: galaxes 6 6 mail. Con

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARCANOS'S INVESTMENTS, LLC

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December 2, 2015

FLORIDA DEPARTMENT OF STATE

G & A ACCOUNTING AND TAXES SERVICES, INC

SUBJECT: MARCANOS'S INVESTMENTS, LLC

REF: L15000195138

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Shelia H Young

Regulatory Specialist II

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12/2/2015

10:20

TO: 18506176383 FROM: 7862315720 ARTICLES OF AMENDMENT

Page:

4

TO ARTICLES OF ORGANIZATION OF

MARCANOS'S INVESTMENTS, I			
(Name of the Limit	rd Liability Company a (A Florida Limited Liabi	is it now appears on our reco- lity Company)	rds.)
The Articles of Organization for this Limited Li	ability Company we	re filed on 11/18/2015	and assigned
lorida document number L15000195138	•		
his amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	the limited liability	company here:	
MARCANO'S INVESTMENTS, LLC			
he new name must be distinguishable and contain the w	ords "Limited Liability C	Company," the designation "LL	.C" or the abbreviation "L.L.C."
Inter new principal offices address, if applica	able: N	i/A	70 7
Principal office address MUST BE A STREE	T ADDRESS)		
			
			SSR 2 F
nter new mailing address, if applicable:	<u>N</u>	I/A	
lailing address MAY BE A POST OFFICE BOX)			<u> </u>
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5. If amending the registered agent and/of the new registered of New Registered Agent:			ds, enter the name of the
	2409 CENTERGA	TE Dr. APT 204	A AND AND AND AND AND AND AND AND AND AN
New Registered Office Address:	2407 CENTERUA	Enter Florida street addr	ess
•	MIRAMAR	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Florida 33025
		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.

Changing Registered Agent, Signature of New Registered Agent

12/2/2015 10:20 TO:18506176383 FROM: 7862315720 Page: 5 If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being auueu or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than the date of filing:	(optional)	
in effective date is listed, the date must be specific and cannot be prior to date of filing or a total. If the date inserted in this block does not meet the applicable statutory filingument's effective date on the Department of State's records.	ng requirements, this date will not	be li
record specifies a delayed effective date, but not an effective	time, at 12:01 a.m. on the	ear
The 90th day after the record is filed.	and the second second second second	
sted 12 02 15		
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Signature of a member or authorized representative		

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