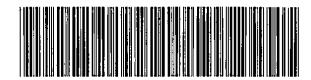
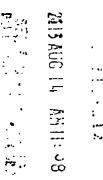
L15000197698

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TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	THORE GROUP LLC			
(Name of the Limit	ed Llability Company as it now appear (A Florida Limited Liability Company)	s on our records.)		
he Articles of Organization for this Limited Li	ability Company were filed on	11-30-2015	and assigned	
lorida document numberL15000197698	 ,			
his amendment is submitted to amend the follo	owing:			
. If amending name, enter the new name of	the limited liability company h	e <u>re</u> :		
ne new name must be distinguishable and contain the w	ords "Limited Liability Company," the o	tesignation "LLC" or the abb	oreviation "L.L.(
nter new principal offices address, if applic	able:	. <u>.</u>		-
Principal office address MUST BE A STREE	T ADDRESS)		2.33	, , , , , , , , , , , , , , , , , , ,
			***	AUG DUA
			•	<u>-</u> -
nter new mailing address, if applicable:			γ **	27
			•	
Mailing address MAY BE A POST OFFICE	<u></u>		j	ن
			<u> </u>	
 If amending the registered agent and egistered agent and/or the new registered or 	ffice address here:	n our records, <u>enter</u>	the name o	f the
Name of New Registered Agent:	AMELIA APONTE			
New Registered Office Address:	10750 NW 66 STREET NO 40	1		
Washington of the same	Enter Flo	orida street address		
	DORAL	, Florida <u>33</u>	178	
	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

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>	<u>Name</u>	Address	Type of Action
AMBR	APONTE, AMELIA	10750 NW 66 STREET	Add
		NO 401	□ Remove
		DORAL, FL 33178	Change
AMBR	LOPEZ, XIOMARA	10750 NW 66 STREET	
		NO 401	■ Remove
		DORAL, FL 33178	Change
			□ Add
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Add 'P,
			☐ Remove
			□ Change
			□ Remove
			Change

 		
fective date, if other th	han the date of filing:	
in effective date is listed, the nee: If the date inserted in	the date of filing. I date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 in this block does not meet the applicable statutory filing requirements, this date will not be listed on the Department of State's records.	3207 (3 d as th
e record specifies a d The 90th day after t	delayed effective date, but not an effective time, at 12:01 a.m. on the earlie the record is filed.	r of:
MAY 14	2019	
X	Signature of a member or authorized representative of a member	
	AMELIA APONTE	
	Typed or printed name of signee	

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