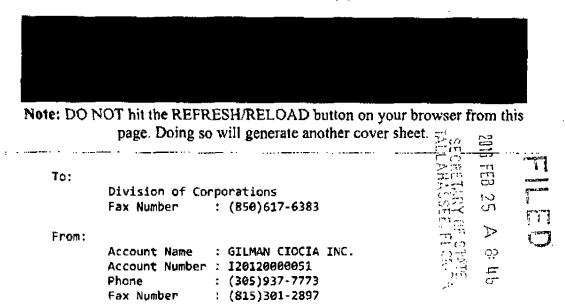
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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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 LUGANO CAPITAL LLC

Certificate of Status	0
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Estimated Charge	\$25.00

FEB 25 2015

BRUCE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUGANO CAPITAL LLC			
(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our <u>recor</u> ds.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on DECEN	ABER 11, 2015	and assigned
Florida document number 1.15000206757	_·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ted liability company here:		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the design	ntion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)		
		P.O.	23
Inter new malling address, if applicable:		17-7-1 CO:3-1	CO same
Mailing address MAY BE A POST OFFICE BOX)		171	ഗ
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B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on our ress here:	records, enter t	he name of the n
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida st	राष्ट्रा वर्धकालसः	
	· · · · · · · · · · · · · · · · · · ·	, Florida	Zip Code
	City		zip Cone

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	ZUK DOMESTIC HOLDINGS IN	2875 NE 191 ST #601	
		AVENTURA, FL 33180	■ Remove
			Change
AMBR	RONEN BECHOR	2875 NE 191 ST #601	
		AVENTURA, FL 33180	Ranove
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be	he prior to date	of filing or more	or	otional)) Dimuisi	ቀደ ተለ ልዝፍ በኃ/ነ
te: If the date inserted in this block does not meet the nument's effective date on the Department of State's re	applicable sta	tutory filing re	quirements, t	his date	will not	be listed as
record specifies a delayed effective date, b	ut not an e	effective time	, at 12:01	l a.m.	on the	earlier o
he 90th day after the record is filed.						
FEBRUARY 19 2016						
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Signature of a member of	or authorized s	presentative of a	member			-

Page 3 of 3

Filing Fee: \$25.00