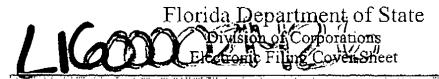
8/11/2017

Division of Corporations



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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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HISPANUSA INC Account Number : 120070000099 : (954)478-2706 Phone : (954)934-0334 Fax Number

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J & A ALLIANCE LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
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D. SCOTT AUG 1 4 2017

COVER LETTER

| TO: | Registration S Division of Co | | | |
|----------|----------------------------------|--|---|--|
| CUBIC | .cr | J & A ALLIANCE LLC | | |
| SUBJE | .C.I: | Name of Lin | nited Liability Company | |
| The end | closed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please: | enun ali corresp | ondence concerning this matter | to the following: | |
| | | JESI | US MORALES HERNANDEZ | |
| | | | Name of Person | |
| | | | MGR | |
| | | | Firm/Company | |
| | | 25 | 001 RIVERSIDE DR APT 108 | · |
| | | ~ | Address | |
| | | C | ORAL SPRINGS FL 33065 | TAS 写 |
| | | | City/State and Zip Code | |
| | | | info@hispanusainc.com | 初記一口 |
| | | | to be used for future annual report notiff | ication) Set T |
| For furt | her information o | concerning this matter, please c | all; | 三 三 |
| JESUS | MORALES HE | RNADEZ | 954 607-9764 at () | 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | Name 0 | f Person | Arca Codc Daytime | Telephone Number |
| Enclose | d is a check for t | he following amount: | | |
| \$25 | .00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Regist Divisio P.O. B | ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314 | STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323 | tions ster Circle |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| J & A ALLIAN | CELLC |
|--|--|
| (Name of the Limited Liability Comp. (A Florida Limited | agy as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number L16000021426 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 2901 RIVERSIDE DR APT 108 |
| (Principal office address MUST BE A STREET ADDRESS) | CORAL SPRINGS FL 33065 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her | |
| Name of New Registered Agent: | |
| New Registered Office Address: | Enter Florida street address |
| New Registered Agent's Signature, if changing Registered Agent: | Florida Zip Code |
| I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is |

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

| Title | Name | Address | Type of Action |
|-------|-------------------------|---------------------------|---------------------------------------|
| MGR | JESUS MORALES HERNANDEZ | 2901 RIVERSIDE DR APT 108 | □ Add |
| | | CORAL SPRINGS FL 33965 | □ Remove |
| | | | ☐ Change |
| AMBR | ANA JARAMILLO ZULUAGA | 2901 RIVERSIDE DR APT 108 | |
| | | CORAL SPRINGS FL 33065 | Remove |
| | | · · | ■ Change |
| | | · | □ Add |
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| | ong any other intormation | n, enter change(s) here: (Attach additional sheets, if necessary.) |
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| | | 08/11/2017 |
| Of an effect | e date, if other than the dat tive date is listed, the date must be | specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 |
| Note: If | the date inserted in this block it's effective date on the Depar | does not meet the applicable statutory filing requirements, this date will not be listed a rement of State's records. |
| | | |
| the recor) The 9 | rd specifies a delayed ef Oth day after the record | ffective date, but not an effective time, at 12:01 a.m. on the earlier of is filed. |
| Dated | AUGUST !1 | 2017 |
| | | DOUE VOER DES D |
| | Sign | nature of a member or authorized representative of a member |
| | | JESUS MORALES HERNANDEZ |

Page 3 of 3

Filing Fee: \$25.00