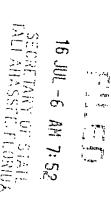
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Office Use Only



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COVER LETTER

TO: Registration Division of C	Section Corporations • Î		
SUBJECT:	ARMSTRONG HOLDINGS,	LLC	
3000EQ1.	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JEFFF	REY A. LEVINE, ESQ.	
		Name of Person	
	JEFFR	EY A. LEVINE, P.A.	
		Firm/Company	
	6751 N FE	DERAL HIGHWAY #301	
		Address	
	BOCA RA	TON, FLORIDA 33487	
		City/State and Zip Code	
		SY@JALEVINE.COM	
	E-mail address: (i	to be used for future annual report notifi	ication)
For further information	n concerning this matter, please ca	all:	
JEFFREY A.	LEVINE	561 997-8688 at ()	
Name	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	r the 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)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARMSTRONG HOLDINGS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on FEBRUARY 22, 2016 and assigned Florida document number __L16000035887 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

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
MGR	MICHAEL SCHWAB	941 NE 176 STREET	
		MIAMI, FLORIDA 33162	Remove
			□ Change
MGR	ESTHER SCHWAB	941 NE 176 STREET	■ Add
		MIAMI, FLORIDA 33162	□ Remove
			Change
MGR	JEFFREY A LEVINE	6751 N FEDERAL HGWY #301	□ Add
		BOCA RATON, FLORIDA 33487	■ Remove
			□ Change
			Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change

Effective date, if other than the date of filing: (If an effective 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 02 Mote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The 90th day after the record is filed. Dated July 1, 2016 Administrative of a member or authorized representative of a member JEFFREY A. LEVINE				
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Filing Fee: \$25.00