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(((H16000106334 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NEW START BUSINESS SOLUTIONS INC

Account Number: I20130000079

Phone : (305)804-1047

: (866)767-7835 Fax Number

\*\*Enter the email address for this business entity to be used for Extur annual report mailings. Enter only one email address plaase.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN F W F ENTERPRISES LLC

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NEX 0 S 50 Mg ; ERUCE

4/28/2016

From: Hector Rodriguez Fax: (866) 767-7835

## Fax: +1 (850) 617-6383 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Page 32 (e/j4 004/28/2016 6:42 PM OF

F W F ENTERPRISES LLC			
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on ou	r records.)	<del></del>
(, , , , , , , , , , , , , , , , , , ,	, <sub>F</sub> , )		
The Articles of Organization for this Limited Liability Company w	ere filed on 02/22/201	6	and assigned
Florida document number L16000036692			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	y company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designati	on "LLC" or the abbi	reviation "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)			
	,	J., ,	· ·
		-	C.C.
B. If amending the registered agent and/or registered office	ce address on our	records, Enter t	he name of the nev
registered agent and/or the new registered office address here:		1 X X X	J
		ma -	
Name of New Registered Agent:			>
Name Danistana d Office Addresses		25	o ·
New Registered Office Address:	Enter Florida stre	et address, -	-
		. Florida	
	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

From: Hector Rodriguez Fax: (866) 767-7835 To: Sunbiz LLC Grant Fax: +1 (860) 617-6383 Page 3 of 4.04/28/2018 6:42 PM being added or removed from our records: (((16000106334 3)))

MGR = Manager AMBR = Authorized Member

RMUY J GUILLERMO	275 NW 132 AVE  MIAMI, FL 33182  185 SW 132 AVE  MIAMI, FL 33184	Add  Remove  Change  Add  Remove  Change
	185 SW 132 AVE MIAM1, FL 33184 185 SW 132 AVE	☐ Change ☐ Add ☐ Remove ☐ Change
	MIAMI, FL 33184	☐ Add  Remove ☐ Change
	MIAMI, FL 33184	■ Remove
ILLERMO J PERMUY	185 SW 132 AVE	☐ Change
TLLERMO J PERMUY		
TLLERMO J PERMUY		■ Add
	14143 (I FF 20104	
•	MIAMI, FL 33184	□ Remove
		☐ Change
1GR PERMUY FRANKY	275 NW 132 AVE	Add
	MIAMI, FL 33182	
		Change
MIAMI, FL 33182	275 NW 132 AVE	
	MIAMI, FL 33182	Remove
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		□ Add
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		☐ Change
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the fi	st be specific and cannot be plock does not meet the ap	plicable statutory fil	more than 90 days after ing requirements, this	r filing.) Pursuant to 60	05.0 sted
ne record specifies a delaye The 90th day after the rec		not an effective	e time, at 12:01 a	a.m. on the ear	lier
Dated APRIL 28	2016				
Dated		<del></del> •			
Fra	ncisco T Perm	elej_			
	Signature of a member or	monized representati	ve of a member		

Filing Fee: \$25.00

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