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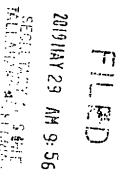
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COVER LETTER

TO:	Registration Sec Division of Corp			- ``
eim ir	ARIEL FAI	LCON LLC		
SUBJE	CI:	Name of Limi	ted Liability Company	-
The end	closed Articles of a	Amendment and fee(s) are subt	nitted for filing.	
Please 1	eturn all correspon	ndence concerning this matter t	to the following:	
		YUDERCA M BARBERA		
			Name of Person	
		BUSINESS PLUS TAX SO	OLUTIONS INC	
			Firm/Company	
		5258 GOLDEN GATE PK	WY SUITE 106	
			Address	
		NAPLES, FL 34116		
		-,	City/State and Zip Code	
		yudy@accountingplusmore.		
		E-mail address: (t	o be used for future annual report notific	cation)
For furt	her information co	oncerning this matter, please ca	dl:	
YUDY	BARBERA		239 643-9968 at ()	
	Name of	i Person		Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$25	0.00 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

ARIEL FALCON LLC

(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our re ited Liability Company)	scords.)
The Articles of Organization for this Limited Liability Comp Florida document number $\frac{L16000039473}{L16000039473}$	oany were filed on 02/25/2016	and assigned
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 I	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	<u> </u>	
		20191 TALL
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ords, enter the hame of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ddress
		, Florida
		, FIOLIUA

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JORGE G RODRIGUEZ	1165 EVERGLADES BLVD N NAPLES, FL 34120	
			□ Remove
			Change
MGR	JAIME A CALLE LOZANO	3320 2ND AVENUE SE NAPLES, FL 34117	■ Add
			Remove
			Change
			Remove Change
			□ Add □ Remove
			□ Change
			Add
			Remove
			Change
		·	Add
			☐ Remove
			Change

Effective date, if other than the date of filing: fan effective date, if other than the date of filing: fan 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 605.00 votes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed locument's effective date on the Department of State's records. see record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed. Signature of a member or authorized representative of a member Art &								
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Filing Fee: \$25.00