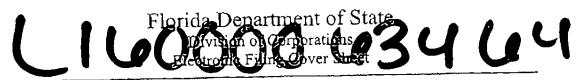
1/3/2018

Oivision 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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	Division of Corpo	rations
	Fax Number :	(850)617-6383
From:		EXPRESS CORPORATE FILING SERVICE INC.
	Account Number :	17000000146
	Phone :	(305)444-4994
	Fax Number :	(305)444-4977
	13 -dange 4	for this business entity to be used for future
Enter. an	the emall address i nual report mailing	s. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLEX IDX, LLC

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JAN - 3 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLEX IDX, LLC							
Name of the Umited Liability Compa- (A Florida Limited U	ny as it now agnears on o	nt tecords")					
	!#						
The Articles of Organization for this Limited Liability Company were filed on 03/30/16 and assigned							
Florida document number L16000063464							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liab	lity company here:						
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designs	tion "LLC" or the abbi					
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDRESS)			3 to 12 to 14 to 14 to 15 to 1				
			· c.>				
			717				
Enter new mailing address, if applicable:			10				
	T		 P-3				
(Mailing address MAY BE A POST OFFICE BOX)							
B. If amending the registered agent and/or registered of	ffice address on our	records, enter t	he name of the ne				
registered agent and/or the new registered office address her	<u>6</u> :						
	۶						
Name of New Registered Agent:							
Now Benins and Office Address:							
New Registered Office Address:	Enter Florida st	Enter Florida strest address					
		. Florida					
	City	, Florida	Zip Code				
New Registered Agent's Signature, if changing Registered Agent:	ni						
I hereby accept the appointment as registered agent and agr	ree to act in this capa	city. I further agri	es to comply with th				
provisions of all statutes relative to the proper and complete	e performance of my a	luties, and I am fo	miliar with and				
accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	provided for in Chap	ter 605, F.S. Or, i	f this document is				
heing filed to merery reflect a change in the registered office	. Guaress, Friercoy co						

If Changing Registered Agent, Signature of New Registered Agent

Page ToLL

company has been notified in writing of this change.

. . -- .-

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>Name</u>	Address	Type of Action
CIAO BELLA MARKETING LLC	1500 MICHIGAN A VENUE	Add
	STE 6	■ Remove
	MIAMI BEACH FLORIDA 33139	Change
DOT ALLIANCE LLC	2828 CORAL WAY	
	SUITE 435	≅ Remov [®]
	MIAMI FLORIDA 33145	Change
IOSH D STEIN	2828 CORA WAY	E Add
	SUITE 435	
	MIAMI FLORIDA 33145	Change
FRANCISCO AGUIRRE	2828 CORAL WAY	
	SUITE 435	□ Kemoye
	MIAMI FLORIDA 33145	☐ Charige
CHRISTOHER A AUGUSTIN	2828 CORAL WAY	₩ Add
	SUITE 435	C.> □ Rémove
	MIAMI FLORIDA 33145	
	.:	□ Remove
		☐ Change
	DOT ALLIANCE LLC JOSH D STEIN FRANCISCO AGUIRRE	DOT ALLIANCE LLC STE 6 MIAMI BEACH FLORIDA 33139 DOT ALLIANCE LLC 2828 CORAL WAY SUITE 435 MIAMI FLORIDA 33145 FRANCISCO AGUIRRE 2828 CORAL WAY SUITE 435 MIAMI FLORIDA 33145 CHRISTOHER A AUGUSTIN 1000 MICHIGAN A VENUE STE 6 MIAMI FLORIDA 33139 Z828 CORAL WAY SUITE 435 MIAMI FLORIDA 33145 CHRISTOHER A AUGUSTIN 2828 CORAL WAY SUITE 435 MIAMI FLORIDA 33145

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Stive date, if other to	0.71	10/01/17		(ontio	nal)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 1st 2017 FRANCISCO AGUIRRE// MOR Typed or printed name of signed