10/13/2016

Division of Corporations



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : MARILI CANCIO JOHNSON P.A

Account Number : 120160000073

Phone : (305) 967-6329

Fax Number

: (305)470-7453

**Enter the email address for this business entity to be used fé产环红斑 annual report mailings. Enter only one email address please: **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARQSYSTEM LLC

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D. SCOTT

OCT 13 2016

COVER LETTER

TO: Registration Sect Division of Corpo	prations	
SUBJECT:	Argsystem 26 V Name of Limited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are submitted for filing.	
Please return all correspond	lence concerning this matter to the following:	
	Marili Cancio Johnson	
	Marili Cancio Johnson PA.	
	1395 Bricke 11-Ave, Suite 650	
	Meanu FL 33/3/ City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information con	cerning this matter, please call:	
May 1/1 C	GNC10 Johnson at 780 FON - 233 5 6 Creson Area Code Daytime Telephone Number 8 7	
Enclosed is a check for the	following amount: \$\int \frac{1}{30.00} \text{ Filing Fee & } \int \frac{1}{360.00} \text{ Filing Fee,} \int \frac{1}{30.00} \text{ Filing Fee,}	۹.
5- \$25.00 Filing Fce	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	j

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

(Name of the Limited Lability Company as i	now appears on our records.)
The Articles of Organization for this Limited Liability Company were Florida document number 4-1600073500	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability c	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," 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 a	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 Florida
C	zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I herehy accept the appointment as registered agent and agree to a provisions of all statutes relative to the proper and complete perfo accept the obligations of my position as registered agent as provid being filed to merely reflect a change in the registered office addressing the company has been notified in writing of this change.	rmance of my duties, and I am familiar with and ed 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	<u>Address</u>		Type of Action
MGR	Ednusson C	Phaves Sousa	1395 Brickell Ave	_ b ∡∖Add
			Suite 650	□ Remove
		······································	Miani, FL 331	36 Change
				C Add
				_□ Remove
				Change
				DAdd
		·,		Remove
				_ Change
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				_DXdd
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				_□ Change
				_D Add
				□ Remove
				□ Change

Dept of State		2016-10-13 15:13:41 (GMT)	13054707453 From: Marili Cancio Joh
D. If amen	ding any other infor	mation, enter change(s) here: (Attach additional s	sheets, if necessary.)
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			200
Park			
(if an effec <u>Note:</u> If	tive date is listed, the date if the date inserted in this	he date of filing: must be specific and cannot be prior to date of filing or more the block does not meet the applicable statutory filing requ Department of State's records.	(optional) an 90 days after filing.) Pursuant to 605.0207 (3)(t uirements, this date will not be listed as the
	rd specifies a delay Oth day after the r	ved effective date, but not an effective time, ecord is filed.	, at 12:01 a.m. on the earlier of:
Dated _		ct 12, \$016.	
		Signature of a member or authorized representative of a n	
		111.	S. CIO Maragement

Page 3 of 3

Filing Fee: \$25.00