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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Avigo International, LLC | | |
|---|---|---|
| (<u>Name of the Limited Liability Co</u> (A Florida Limi | ompany as it now appears on our ited Liability Company) | records.) |
| The Articles of Organization for this Limited Liability Comp | pany were filed on $\frac{05/09/2016}{1}$ | and assigned |
| Florida document number L16000090813 | | |
| 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 L | iability 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> | |
| | - | 20 |
| | | 2019 AUS |
| Enter new mailing address, if applicable: | | 10s 1 |
| Mailing address MAY BE A POST OFFICE BOX) | | 6 |
| | | 991 Pg 177 |
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| B. If amending the registered agent and/or registered registered agent and/or the new registered office address | d office address on our re <u>here</u> : | ·—— · · · · · · · · · · · · · · · · · · |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| New Registered Office Address. | Enter Florida street | 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 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> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------------------------|--|----------------|
| MGR | Michael G. Park | 604 Banyan Trail #811352 Boca Raton, FL 33481 | Add |
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| Note: | ive date, if other than the date of filing: |
| | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed. |
| Dated | August 15 , 2019 . |
| | Signature of a member or authorized representative of a member |
| | |
| | Michael G. Park, Authorized Representative |