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To:
Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MACARI HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MACARI HOLDINGS, LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our records, ed Liability Company)	3)
The Articles of Organization for this Limited Liability Compar	ny were filed on 05/11/2016	and assigned
Florida document number 1.16000091366		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
		2:
he new name must be distinguishable and contain the words "Limited Lin	bility Company," the designation "LI.C"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter th</u>	ie name of the new registers
and apply the new registered office address nere.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida
	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>	Name	Address	Type of Action
MGR	JTC TRUSTEES (USA) LTD	140 N PHILLIPS AVE, SUFFE 301	□Add
		SIOUX FALLS, SD 57104	Remove
			DChange
MGR	JTC Corporate Services (USA), LLC	140 N PHILLIPS AVE, SUITE 301	
		SIOUX FALLS, SD 57104	□Remove
			Change
			□ Add
			☐Remove
			☐ Change
			🖸 Add
			∏Rcmove
			□Add
			□ Remove
			Change
,			CJAdd
			Remove
			□ Change

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