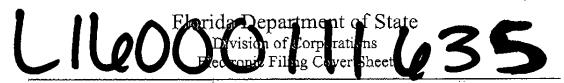
8/10/2016

Division of Corporations



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORIGEN PLUS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



| ORIGEN PLUS LLC   |  |  |  |  |  |
|---|--|--|--|--|--|
| (Name of the Lim  | ited Liability Company as it now appears (A Florida Limited Liability Company) | on our records.)                               |  |  |  |
| The Articles of Organization for this Limited I                                       | Liability Company were filed on 06/0   | 18/2016 and assigned                           |  |  |  |
| This amendment is submitted to amend the fol  | lowing:  |  |  |  |  |
| A. If amending name, enter the new name   | of the limited liability company her   | <u>'e</u> :                                    |  |  |  |
| The new name must be distinguishable and contain the                                  | words "I imited I ishility Company" the de-                                    | eignation "T.J.C" or the abbreviation "L.L.C." |  |  |  |
| Enter new principal offices address, if appli   |  | ened<br>Ste (7)                                |  |  |  |
| Principal office address MUST BE A STRE   | ET ADDRESS)  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
| Enter new mailing address, if applicable:   | <del></del>  | THE ET IT                                      |  |  |  |
| Mailing address MAY BE A POST OFFICE  | <u> </u>   | ာဟ ထ ဆီ  |  |  |  |
|   |  | ž≧, <b>£</b>                                   |  |  |  |
|   |  | <del>1</del>                                   |  |  |  |
| B. If amending the registered agent and registered agent and/or the new registered of |  | our records, enter the name of the             |  |  |  |
| Name of New Registered Agent:   | PASCUALE GUGLIOTTA   |  |  |  |  |
| New Registered Office Address:  | 2702 SW 153 PATH   |  |  |  |  |
| New Registered Office Adultss:  | Enter Florida street address   |  |  |  |  |
|   | MIAMI  | , Florida <sup>33185</sup>                     |  |  |  |
|   | 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.

f Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

\_\_\_\_\_ Remove

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| <u>Title</u> | <u>Name</u>        | Address          | Type of Action |
|--------------|--------------------|------------------|----------------|
| MGR          | PASCUALE GUGLIOTTA | 2702 SW 153 PATH | Add            |
|              |                    | MIAMI, FL 33185  | □ Remove       |
|              |                    |                  | ☐ Change       |
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|              |                    |                  | ☐ Change       |
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|              |                    |                  | □ Remove       |
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|              |                    |                  | BAG T          |

| <b>B,</b>                             | · · · · · · · · · · · · · · · · · · ·  | enter change(s) here:                 |   |  |  |
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| ffective date, if oth                 | her than the date o                    | of filing:                            |   | (optiona                                   | 1)   |
| <u>lote:</u> If the date inse         | rted in this block doc                 | s not meet the applicable             | ate of filing or more that<br>statutory filing requ | n 90 days after filir<br>irements, this da | ng.) Pursuant to 605.02<br>te will not be listed |
| ocument's effective                   | date on the Departme                   | ent of State's records.               |   |  |  |
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| record specifie:<br>The 90th day af   | s a delayed effec<br>ter the record is | tive date, but not ar<br>filed.       | i effective time,                                   | at 12:01 a.m                               | . on the earlier                                 |
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|                                       | 7 granu                                | re of a member or authorize           | d representative of a m                             | ember                                      | <u> </u>   |
| PASCUAL                               | LE GUGLIOTTA                           |                                       |   |  |  |
|                                       |  | Typed or printed na                   | me of signee  | ·  | **************************************           |
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