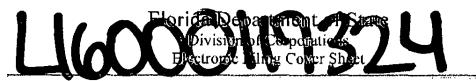
10/12/2016

Division of Corporations



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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (850)205-8842 Phone Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VRC WAREHOUSE LLC

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D. SCOTT OCT 1 3 2016

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VRC WAREHOUSE LLC		·
( <u>Name of the Limited Liability</u> (A Florida L	Company as It now appears on our records.) inited Liability Company)	
The Articles of Organization for this Limited Liability Con-	mpany were filed on 6/17/2016	and assigned
Florida document number L16000117324		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limited	ed Linbility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		· •'
B. If amending the registered agent and/or registered agent and/or the new registered office address		r the name of the new
registered agent and/or the new registered office about	as nere.	宫ョ 1
Mana of Many Danistoned Amoust		
Name of New Registered Agent:		TO THE STATE OF TH
New Registered Office Address:	Enter Florida street address	No o
•	una: rioriau sirea adaress	
	, Florida	70700 5
	City	LIPROUP TO

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 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

<u>Title</u>	Name	Address	Type of Action
AMBR	Nidia Hernandez	P.O. Box 661477	
		MIAMI SPRINGS, FL 33266	□ Remove
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			☐ Remove
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Mute: 11	e date, if other than the date of filing:  (optional)  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	0.0207 (3)(b) ed as the
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