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To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name : FELDMAN & ASSOCIATES

Account Number : 120130000018 Phone : (786)288-5699 Fax Number : (866)856-1462

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

Email Address: paul@feldmanclosings.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YOSEFANZA, LLC

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D. SCOTT

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yosefanzii, LLC	_		
(Name of the Limited Liability (A Florida Li	inmuser as it now apmited Liability Compa	nears on our records.) ny)	
The Articles of Organization for this Limited Liability Com	ipany were filed	07/22/2016	and assigned
on Florida document number L16000137171			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limiter	i liability company	v hore:	
The new name must be distinguishable and contain the words "Limited	Liability Company,* t	he designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:			Se s
(Principal office address MUST RE A STREET ADDRES	<u> </u>		
			3-3-1
			ME F
Enter new mailing address, if applicable:			
(Mulling address MAY BE A POST OFFICE BOX)			<u> </u>
			<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records, en	ter the name of the nev
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
	Enter	Florida street address	
		, Florid:	·
	Clty		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 camply 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

2016-10-14 11:14 Feldman & Associat	2016:	5-10-14	11:14	Feldman	&	Associ	ate
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8668561462 >>

850-617-6381 P 3/4

_□ 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 = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	The Kazabian Trust	48 Market St Canellat	d □ Add
<u>Mer</u>	Keren Benshimon	Ste 421003 Camana Bay, GC KY11-120 48 Marlet St Canella Cl Ste 421003 Camana Bay, GC KY H-120	O Remove
			Add
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Note: If	the date inserted in this	the date of filing: must be specific and cannot be a block does not meet the ap a Department of State's reco	phore date or thing of more	(option than 90 days after fil equirements, this d	al) ing.) Pursuant to 605. ate will not be liste
f the recor	d specifies a delay	yed effective date, but	not an effective tim	ie, at 12:01 a.r	n. on the earlie

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Paul Feldman, Esq.
Typed or printed name of signos

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