LIV000193

Florida Department of \$tate

Division of Corporations Electronic Filing Cover Sheet

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MT. RIGA INDUSTRIES LLC

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| Page Count | 04 |
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S Warren

SEP 30 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| MT. RIGA INDUSTRIES LLC | |
|--|--|
| (Name of the Limited Liability Company as It now appe- (A Florida Limited Liability Company) | ars on our records.; |
| The Articles of Organization for this Limited Liability Company were filed on Florida document numberL16000153805 | AUGUST 18, 2016 and assigned |
| This amendment is submitted to amend the following: | |
| • | |
| A. If amending name, enter the new name of the limited liability company i | <u>iere</u> : |
| The new name must be distinguishable and contain the words "Limited Liability 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) | The second secon |
| · · · · · · · · · · · · · · · · · · · | 19 40 |
| | |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A PQST OFFICE BOX) | 071 G |
| | THE W |
| B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here: | n our records, enter the name of the new |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | rida street address |
| | , Florida |
| C(f)· | 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 provisions of all statutes relative to the proper and complete performance of accept the obligations of my position as registered agent as provided for in being filed to merely reflect a change in the registered office address, I here company has been notified in writing of this change. | f my duties, and I am familiar with and Chapter 605, F.S. Or, if this document is |
| If Changing Registered A | gent, Signature of New Registered Agent |
| Page 1 of 3 | H16000243224 3 |

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

H16000243224 3

MGR = Manager AMBR = Authorized Member

Title Title Name. <u>Address</u> Type of Action **AMBR** JOSEPH VENTURA 6671 W INDIANTOWN ROAD DbA 🗆 STE 50-391 ■ Remove JUPITER, FL 33478 □ Change AMBR TINA GALKA-VENTURA 6671 W INDIANTOWN ROAD 🖼 Add STE 50-391 ☐ Remove JUPITER, FL 33478 Change □ Add □ Remove Change □ Add 三二 Remove Changge □ Add STATE € Remove Change □ Add □ Remove _□ Change H16000243224 3

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| m effec | e date, if other than the sive date is listed, the date of the date inserted in this | mst be specific at | ed cannot be prior to | date of filing or | more than 90 days | s after filing. |) Pursuani | r to 605.0 |
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| | | | TINA GALKA | -VENTURA | | (1.3 | | |
| | | ······································ | TINA GALKA | | | | | _ |
| | | | | | _ | | <u>u</u> | |
| | | | | i name of signee | | - S.F. | | |