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Account Number : I20170000090 Phone : (305)358-1310 Fax Number : (305)503-6701

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH AMERICAN INVESTMENT AN	· · ·			
(Name of the Limited Liability Cor (A Florida Limit	npany as It now appears on or ed Liability Company) —	ur records.)		
The Articles of Organization for this Limited Liability Compa	any were filed on08/19/2	016	and assign	ed
Plorida document number L16000155603	•			
This amendment is submitted to amend the following:		٠.		
A. If amending name, enter the new name of the limited li	iability company here:	o para magazina.	g g g an am menana an terre a s	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designat	tion "LLC" or th	e abbreviation "L.L.C	н
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS	<u> </u>		······································	
	and the state of t	, , , , , , , , , , , , , , , , , , , ,		
Enter new mailing address, if applicable:		***************************************		
Mailing address MAY BE A POST OFFICE BOX)				
,			75 2 <u>2</u>	
N 76 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			- S	- 3
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	ce address on our record	s, enter the n	ame of the new re	gister
	,			; ()
Name of New Registered Agent:				, , ,
Haine of New Registrico Agent.			- <u>:</u> , ;	<u> </u>
New Registered Office Address:	Enter Florida stra	and delegan	<u> </u>	
	ARCE FIBRIGIT SIT	CAL MARIA 6.93	·. •	
· · · · · · · · · · · · · · · · · · ·	Cin	, Florida	Zip Code	
			Zip Code	
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>			
hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple	ete performance of my di	uties, and La		nd

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 Actio
AMBR	SINUHE ESTRABAO	235 PARK AVE SOUTH 9FL	
		NEW YORK, NY 10003	■Remove
nana nya matana ara ara ara ara ara ara ara ara ara	The second secon	•	□Add
			□Remove
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			ПСпюче
			☐ Change
	A-173	·	□Add
			ПRетюч е
•			□Change

Signature of a mythod of authorized representative of a member

DANIEL R BARON

Typed or printed name of signee