From: Candy McDonah

Note: Please print this page and use it as a cover sheef. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

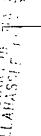
Fax Number : (850) 617-6383

From:

Account Name : SWART BAUMRUK & COMPANY, LLP Account Number: 120000000291

Phone : (407)847-7466 Fax Number : (407)847-6641

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



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To:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | | and assigned |
|--|---|--------------------------|
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | |
| The new name most be distinguishable and contain the words "Limited Light | lity Company," the designation "LL,C" or th | to abbreviation "L L.C." |
| Plorida document number L17000034730 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name most be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LE enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | T. 10 | |
| (Principal office address MUST BE A STREET ADD)RESS) | | ## 5 1 |
| Enter new mailing address, if applicable: | | σ m |
| ••• | | PH 72 54 |
| | | - |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | · | |
| | | |
| New Registered Agent's Signature, if changing Registered Agent; | | |
| I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete | | |

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

Page 1 of 3

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From: Candy McDonah

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

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MGR = Manager AMBR = Authorized Member

| Title | Name | Address | Type of Action |
|-------|----------------|--|-----------------|
| AMBR | Jose L. Valero | 712 Teal Ave. | □ Add |
| | | Celebration, FL 34747 | ⊠ Remove |
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| Effective date, if other than the fame flective date is fisted, the date mu | st he specific and cannot be | prior to date | of filing or mo | ire than 90 days | optional) satter filing.) P | ursuant to 605 | 5,0207 |
| Note: If the date inserted in this bedecument's effective date on the D | lock does not meet the a | phicable st | autory filing | requirements | s, this date wi | II not be list | ed as |
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| e record specifies a delaye The 90th day after the rec | d effective date, bu | not an | effective ti | me, at 12: | 01 a.m. or | the earli | er o |
| The Sounday after the rec | cra is mea. | | | | | | |
| | | | |) | | | |
| Dated August 7 | 2019 | | | | | | |
| Jaco | | | | |) | | |
| Dated August 7 | Signature of a member of | nuthorized/ | upresentative i | Joy of a member |). ලට | | |

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