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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839

Fax Number

: (305)592-9591.

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

Email Address:

2

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALEX DANIEL LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALEX DANIEL LLC		
(Name of the Limited Linbility ((A Florida Li	Immany as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 02/23/2017	and assigned
Florida document number L17000043865		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	i liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	55)	
		MAR
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		9
B. If amending the registered agent and/or register registered agent and/or the new registered office address		iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	•	
	, Florida	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 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 = Anthorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MATA GUERRA, OSCAR	2358 SW 18TH ST APT 3	₩ Add
	•	MIAMI, FL 33145	☐ Remove
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Effective	e date, if other tl	han the date of f	iling: 03/01/2017		(optional)		
Vote: If	the date inserted in	n this block does n		ate of filing or more to e statutory filing rec	han 90 days after filing.) quirements, this date w	rursuant to 605.020 vill not be listed a	7 (3)(0 s the
	rd specifies a d Oth day after t			n effective time	a, at 12:01 a.m. o	n the earlier o	f:
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