Note: Please print this page and use it as a cover sheet. 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

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: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone Fax Number : (305)552-5973 : (305)675-5944

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

E mail	Address:	;	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YOU CAN TALK TO ME LLC

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D. SCOTT MAR 2 7 2017

LAZARUS
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H17000082084

ARTICLES OF AMENDMENT * TO ARTICLES OF ORGANIZATION OF

TOO CAN TALK TO ME LLC			
Name of the Lim	(A Florida Limited Liab	s it now expenses on lity Company)	OUT tecords.
The Articles of Organization for this Limited I	Liability Company we	re filed on 03/21/2	017and assigned
Florida document number L17000064714	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability	company here:	
The new name coast be distinguishable and contain the	words "Limited Liability (Company," the design	etion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	-11.	
	_		78.7
	•		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
Enter new mailing address, if applicable:		<u> </u>	- 3 2 =
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>		32 F M
	_		
B. If amending the registered agent and	Voc registered office	address on our	r records anter the name of the nor
registered agent and/or the new registered			Print 3
Name of New Registered Agent:	ORLANDO LAO		
	8300 SW 8 ST 9TE	7 103	
New Registered Office Address:	4100 M 6 00 1 0 1 E	Enter Florido e	rest address
	MIAMI		, Florida <u>33186</u>
	·	City	Zip Code

New Registered Agent's Signature, if changing Registered Agenti

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.

Hehanging Registered Agent, Signature of New Resistered Agent

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03/24/2017 02:07PM 3052640109

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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 Action
MBR	LEONARDO BABUN	12821 SW 147 LN RD	Add
		MIAMU,FL 33186	■ Remove
			☐ Change
MBR	ORLANDO LAO	8300 SW 8 ST STE 103	
		MIAMI,FL 33144	☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
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			Opto To Add To
			☐ Remove
			☐ Change
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			Remove
			Chenge

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LAZARUS

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ALPHA Accounting

TI BIRCHO	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	- LO 0,
		
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	Contional Contio	B
Note: If	the date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuing in 505,030 the date inserted in this block does not meet the applicable standary filing requirements, this date will but be listed a tr's effective date on the Department of State's records.	7 (3)(b) s the
the reco	rd specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier ϵ . Oth day after the record is filed,	of:
Dated _	3/24/2017	
	Del :	
	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00