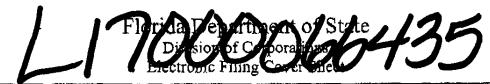
Division of Corporations



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(((H17000142574 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : I20130000076 : (305)388-7028 Phone Fax Number : (305)479-2705

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISOMABE GROUP LLC

Certificate of Status	0
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Help O SIMMONS MAY 26 2017

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ISOMABE GROUP LLC		
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on	03/23/2017	and assigned
Florida document numberL17000066435	·		
his amendment is submitted to amend the fo	llowing:		
L If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
N/A			
The new name must be distinguishable and contain the	words "Limited Liability Company," the de-	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE)	ET ADDRESS)		
			100
Enter new mailing address, if applicable:			टा
(Mailing address MAY BE A POST OFFICE BOX)			er Lander Lander
Mining Basics JAMI DE ATOST OFFICE		<u></u>	<u> </u>
,	<u></u>		
3. If amending the registered agent and registered agent and/or the new registered	office address here:	our records, ente	r the name of the ne
Name of New Registered Agent:	N/A		•
New Registered Office Address:			
	Enter Flor	ida street oddress	
		, Florida _	
	City		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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CARLOS CHAU CHANG	7951 RIVIERA BLVD SUITE 210	
		MTRAMAR, FL 33023	Remove
			10 1 3 N
			☐ Change
AMBR	IRIS S MARTELL DE CHAU	7951 RIVIERA BLVD SUITE 210	D Add O
		MIRAMAR, FL 33023	Remove
			Change
AMBR	KARLA I CHAU MARTELL	7951 RIVIERA BLVD SUITE 210	
		MIRAMAR, FL 33023	■ Remove
			Change
AMBR	CHATELL INC	7951 RIVIERA-BLVD SUITE 210	Add
		MIRAMAR, FL 33023	🗆 Remove
			□ Change
MGR	CARLOS CHAU CHANG	7951 RIVIERA BLVD SUITE 210	■ Add
		MIRAMAR, PL 33023	□ R <del>e</del> move
			Change
MGR	IRIS S MARTELL DE CHAU	7951 RIVIERA BLVD SUITE 210	<b>=</b> Add
		MIRAMAR, FL 33023	☐ Řemove
		<b>₩</b> .[7	☐ Change

	MGR	
Name:	KARLA I CHAU MARTELL	
Address:	7951 RIVIERA BLVD SUITE 210	
	MIRAMAR, FL 33023	
<del></del>		
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tive date,	if other than the date of filing: 05/25/2017 (optional)	
If the dat	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 is inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as active date on the Department of State's records.	(3)(b) the
cord spe	eclfies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	t <b>.</b>
90th da	ay after the record is filed.	•
	5/2017	
05/25		
05/25	Contos chan chang	