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	From: Account Name : GILMAN CIOCIA INC. Account Number : I20120000051 Phone : (305)937-7773 Fax Number : (815)301-2897	TALL 17 N
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ac Articles of Organization for this Limited Liability Company	Ware Filed on 03/27/2017	and engineed
orida document number <u>L17000069325</u>		and assigned
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is amendment is submitted to amend the following:		
If amending name, <u>enter the new name of the limited liab</u>	lity company here:	
a new name must be distinguishable and contain the words "Limited Liabil		abbreviation "L.L.C."
	<u>****</u>	
ter new principal offices address, if applicable:		
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iter new principal offices address, if applicable: <u>rincipal office address MUST BE A STREET ADDRESS</u>) nter new mailing address, if applicable:	STE 1802	
rincipal office address MUST BE A STREET ADDRESS) Her new mailing address, if applicable:	STE 1802 AVENTURA, FL 33160	17 MAR 31
	STE 1802 * AVENTURA, FL 33160 * 3301 NE 183RD STREET *	

	City	Zip Code
	AVENTURA	, Florida 33160
New Registered Office Address:		rida street uddress
	3301 NE 183RD STREET STE 1	203
Name of New Registered Agent;		

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.

 \mathbf{f}^{i} If Changing/Registered Agent, Signature of New Registered Agent Page 1 of 3

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

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<u>Title</u>	Name		Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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