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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT:	ting Edge Co	mplyance and legatified Liability Company	stics LLC
	Amendment and fee(s) are sub		
r lease return an correspo	ndence concorning this matter	to the following.	
	Christine f	Name of Person	
	Cultury Edge	E Complance Coul	ogish ce LCC
	10315 82 1.	79-th Ct Address	
	Miami Re	33180 City/State and Zip Code	
	Christine pai	to be used for future annual report notifica	ation)
For further information c	oncerning this matter, please ca	all:	- 1
Christine	Proposition of Person	at (386) 633-0	Sol & E E T
Enclosed is a check for the	ne following amount:		SSEEJTI
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327	STREET/COURIED Registration Section Division of Corporati Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

CREAT A COLUMN COME L'ESTRAGIA SENTRALIA A

TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Florida document number 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 must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Florida;

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

MGR = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
101	Marcy Macias	1360 NW 128th Street NOTH Mari FL 33167	\Z \Add
			Remove
			Change
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or removed from our records:

•		
•	<u> </u>	
Effec	tive date, if other than the date of filing: $10\sqrt{33/2017}$ (optional)	
(If an e Note:	flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 603,0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	(3) the
docui	ment's effective date on the Department of State's records.	
he re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.	f:
	α	
Date	1 Otton 2312. 2017.	
Date	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00