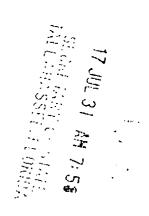
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A)	address)
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## **COVER LETTER**

	egistration Sec ivision of Corp				
SUBJECT	AFFINISEI	USA LLC			
SOBJEC I	•	Name of Lim	ited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	irn all correspoi	ndence concerning this matter	to the following:		
		Alexander J Rodriguez, Cl	'A		
			Name of Person	- <del>;</del>	<del></del>
		AJR Consulting LLC			
			Firm/Company	<del></del>	
		4330 NE 2nd Ave			
			Address	<u> </u>	
		Miami, FL 33137			
			City/State and Zip C	ode	
		kaynoush.naraghi@affinise	*		<del>,</del>
г с л	· c		to be used for future an	nuai report nonno  - 	ration)
		oncerning this matter, please co	uu:		
Alexander	r J Rodriguez, C		305 at (	720-3934	
	Name of	Person	Area Code	Daytime '	Telephone Number
Enclosed i	s a check for th	e following amount:			
\$25.00	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Cop	y	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Reģi Divis Clifts 26¢1	EET/COURIE stration Section sion of Corporat on Building Executive Cen thassee, FL 3230	tions ter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFINISEP USA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Liabilit	y Company) 	
The Articles of Organization for this Limited Liability Company were Florida document number <u>L17000145993</u> .	filed on 07/07/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," 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)		<u>-</u> .
		<del></del>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, ente	r the name of the new
New Registered Office Address:		
	Enter Florida street address , Florida	
New Registered Agent's Signature, if changing Registered Agent:	ity	Zip Tokle
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete performance the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office addressing that been notified in writing of this change.	rmance of my duties, and I an led for in Chapter 605, F.S. O	familiar with and r, if this document is
If Changing F	Registered Agent, Signature of New 1	Registered Agent

IGR = MBR =	Manager Authorized Member		
<u>`itle</u>	<u>Name</u>	Address	Type of Action
MGR	KAYNOUSH SAFAEI NARA	4330 NE 2nd Ave	Add
		Miami, FL 33137	Remove
			Change
AGR	KAYNOUSH SAFAEI NARAGH	4330 NE 2nd Ave	
		Miami, Ft. 33137	□ Remove
			Change
			Add
		□ Remove	
		Change	
		Add	
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			☐ Change
			Add
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(If an effecti Note: If t	date, if other than the date of ive date is listed, the date must be spec- the date inserted in this block does t's effective date on the Departme	ific and cannot be prior to date of I s not meet the applicable statut	iling or more than 90 days afte	
	d specifies a delayed effect oth day after the record is		ective time, at 12:01	a.m. on the earlier of
Dated	ly 28th	2017	0	
		1	Juay )	
	Signatur	re of a member or authorized repre	sentative of a member	
	KAYNOUSH SAFAEI NARAG	CH H		
		JIII		

Page 3 of 3

Filing Fee: \$25.00