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To: Division of Corporations Fax Number : (850)617-6383 Account Name : LAZARUS CORPORATE FILING SERVICE, INC. From: Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (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.** Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EMPIRE MIAMI SERVICES LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMPIRE MIAMI SERVICES LLC			
(Name of the Limited L	ability Companional Limited L	y as It now appears on our ability Company)	ecords.)
The Articles of Organization for this Limited Liabil Florida document number <u>L17000150991</u>			
This amendment is submitted to amend the following			超 4 五
A. If amending name, enter the new name of the	e limited liabi	lity company here:	
		• .	or or other than or other wild C."
The new name must be distinguishable and contain the word	"Limited Liabil	ity Company," the designation	"LLC" or the annreviation LLC"
Enter new principal offices address, if applicabl		N/A	
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u>) X </u>	N/A	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered o e address her	ffice address on our	records, enter the name of the ner
Name of New Registered Agent.	NELSON FER		
New Registered Office Address:	8440 S DIXIE	HWY # 903 BOX 34 Enter Florida stre	et address
	МІАМІ		, Florida 33143
		Cf'9	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent	ii.	Thursday garee to comply with th

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

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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>	<u>Name</u>	Address	Type of Action
MGR	NELSON FERNANDEZ JR	8440 S DIXIE HWY #903 BOX 34	
<u>_</u> _		MIAMI, FL 33143	□ Remove
MGR	MARCIA GONGORA	8440 S DIXIE HWY #903 BOX 34	
		MIAMI, FL 33143	Remove
		Here is a second of the second	Change
ANDR	ANDY FERNANDEZ	8440 S DIXIE HWY #903 BOX 34	Add
		MIAMI, FL 33143	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
AMBR	HECTOR H GONGORA	8440 S DEXTE HWY #903 BOX 34	D Add
		MIAMI, FL 33143	Remove
			El Change
			J D Add
			Remove
			Change
			Add
			☐ Remove
		-	Change

N/A		
		•
	<u>:</u>	
		
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	_	
fective date, if other than the date of filing: _ in effective date is listed, the date must be specific and care note: If the date inserted in this block does not meet secument's effective date on the Department of State	the applicable statutory filing requirem	(optional) days after filing.) Pursuant to 605 nents, this date will not be list
e record specifies a delayed effective date The 90th day after the record is filed.	e, but not an effective time, at	12:01 a.m. on the earll
DECEMBER 12	2017	
ated,,	·,	
Moleun	nber or authorized representative of a mem	

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