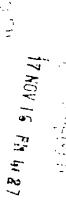
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Account#: I20000000088

Date:11/16/2017	Accounting 12000000000
Name: Merritt Knickle	
Reference #:	
Entity Name: WEBSTER SWAPORAMA, LLC	_
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ASIA PACIFIC HQ

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11/16/2017

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Fictitous Name	
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FICORPORATE HQ COGENCY GLOBAL INC IC E 4G ST, 10 "FL NY, NY 10016 800.221.0102 -1.212.947.7200 ■EUROPEAN HQ COGENCY GLOBAL (U/C) LIMITED REGISTERED IN TACIAND A WALES REGISTER LICENSE 6 BEVIS MARKS, 1915 LONDON ECSA 78A

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Webster Swaporama, LLC						
(<u>Name of the Limited Lishi</u> (A Florid	ility Company as da Limited Liabili	it now appea ty Company)	rs on our rec	rords.)		
The Articles of Organization for this Limited Liability	Company were	e filed on S	eptember 14	, 2017	and assi	gned
Florida document number L17000192295						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lim	mited liability	company h	ere:			
The new name must be distinguishable and contain the words "Lir	imited Liability Co	ompany," the	designation "	LLC" or the ab	breviation "L.L	C."
Enter new principal offices address, if applicable:	_					
(Principal office address MUST BE A STREET ADD	<u>DRESS)</u>					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered agent and/or the new registered office ade	gistered office ldress here:	address o	n our rec	ords, <u>enter</u>	the name (of the new
Name of New Registered Agent:					<u>.</u>	<u> </u>
					./	-;
New Registered Office Address:		Enter Flo	orida street ac	ldress		
				. Florida	Zip Code	
		City			Zip Code	
New Registered Agent's Signature, if changing Register	red Agent:					
I hereby accept the appointment as registered agen	nt and agree to	act in this	capacity.	I further agi	ree to comp	ly with the

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

Tit <u>le</u>	<u>Name</u>	Address	Type of Action
AMBR	Jacques A. Preis	1723 S. Michigan Avenue	
· 		Chicago, IL 60616	□ Remove
			☐ Change
AMBR	Charles T. Joseph	1723 S. Michigan Avenue	
		Chicago, 11. 60616	Remove
			Change
MGR	Jacques A. Preis	1723 S. Michigan Avenue	∑8 Add
		Chicago, IL 60616	☐ Remove
			☐ Change
			Add
			Remove
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			<u>~</u> □ Add
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Core: If the date inserted in this block do	of filing: ecitic and cannot be prior to date of filing or moes not meet the applicable statutory filing nent of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605.020 requirements, this date will not be listed a
		?
e record specifies a delayed effe The 90th day after the record i	ective date, but not an effective t s filed.	me, at 12:01 a.m. on the earlier (
November 16	2017	<i>,</i> •
		<u>:</u>
Dated	try Schidt	. •

Page 3 of 3

Filing Fee: \$25.00