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| (Req | uestor's Name) | |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18 MAY 18 PM 3-59

W. R. & Y SERVICES, LLC

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

| The Articles of Organization for this Limited Liability C | ompany were filed on $\frac{JA}{A}$ | NUARY 8TH 2018 and assigned |
|--|-------------------------------------|---|
| Florida document number L 18000006341 | . | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lim | ited liability company he | <u>re</u> : |
| W R & Y ENTERPRISE SERVICES LLC | | |
| The new name must be distinguishable and contain the words "Lim | ited Liability Company," the d | esignation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 8323 NORTH | WEST 25TH COURT |
| (Principal office address MUST BE A STREET ADDR | SUNRISE, FL | ORIDA 33322 |
| (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office add | | our records, enter the name of the new |
| Name of New Registered Agent: | CARL S PITTER | |
| New Registered Office Address: | 721 NORTH UNIVEFRSI | |
| | Enter Flor | ida street address |
| | LAUDERHILL | , Florida ³³³⁵¹ |
| | Cuy | Zip Code |

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

Hameneing Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| MGR = M $AMBR = A$ | danager Authorized Member | FILED | |
|--------------------|------------------------------|-------------------------|-------------------|
| Title | <u>Name</u> | Address ST MAY 18 PH 3: | 59 Type of Action |
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| Effective date, if other than the Fan effective date is listed, the date mus | date of filing:st be specific and cannot be priv | or to date of filing or more th | (optional) an 90 days after filing.) Pursuant | to 605 9207 (|
| Note: If the date inserted in this bloocument's effective date on the Do | ock does not meet the appl | icable statutory filing req | uirements, this date will not b | e listed as i |
| wedness a creence the on the ex | cparament of state s record | .5. | | |
| ne record specifies a delayed The 90th day after the rec | l effective date, but n ord is filed. | ot an effective time | , at 12:01 a.m. on the ϵ | earlier of: |
| Dated MAY 11TH. | 2018 | / / / | ·) | |
| | 11 | 11/6 | | |
| | Williame- | thorized representative of h | r | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00