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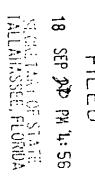
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SEP 21 2018 S. YOUNG



COVER LETTER

TO:	Registration Security Division of Cor			•		
SUBJE	CCT:		ited Liability Company			
The en	closed Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Sh	ora Rodriguez Name of Person			
			CC. LLC FirmvCompany		五年 18	
			era Blud Suite #		SEA AS	FILED
		<u>Mirar</u>	Mal Florida 33 City/State and Zip Code 2119 @ Gmail. Com to be used for future annual report notif	023	P PP PH "4: 55	Ō
		its real clear E-mail address: (1119 @ GMCUL. ('OM to be ased for future annual report notif	ication)	Ser Si	
For fur	ther information co	oncerning this matter, please ca	ill:			
	Shera Name o	Rodriguez	at (<u>305</u>) <u>542</u> Area Code Daytime	98 36 Telephone Number		
Enclos	ed is a check for th	ne following amount:				
\$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IRCC						
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)					
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $O2/28/a$	i 8 and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabi	lity company here:					
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the	abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	7971 Riviera Blud Suite 207					
(Principal office address MUST BE A STREET ADDRESS)	Miramar, FL 330.	23				
Enter new mailing address, if applicable:	7971 Riviera Blud	Suite 207				
(Mailing address MAY BE A POST OFFICE BOX)	7971 Riviera Blud Suite 207 Miromar, FC 33023					
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	r-the name of the new				
	City	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

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 Type of Action <u>Title</u> **Address** <u>Name</u> President MAX Osceola 3321 NW 631d AVE, Hollywood Add FL 33024 Remove Change Vice President Shera Rodriquez 131645W29th ST MIRMAR Add Change _□ Change _□ Add ☐ Remove ☐ Change □ Add _□ Remove

Change

date, if other than the date of filing: date, if other than the date of filing: 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be its effective date on the Department of State's records.	d would	like to	ufeli	ect o	n the	o article	1_
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Filing Fee: \$25.00