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JUN 2 9 2018

COVER LETTER

TO: Amendment Section Division of Corporations
_{suвлест:} Fixpresso, Inc
Name of Corporation
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
scott deutsch
Name of Contact Person
fixpresso, inc
Firm/Company
445 west 40 street #2189
Address
miami beach, fl 33140
City/State and Zip Code
scottd@fixpresso.co
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott deutsch Name of Contact Person at (305 479-4040 Area Code & Daytime Telephone Number
Name of Contact Person at (
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18 FILED 3/1/27 PH 2:40

Fixpresso Miracle, LLC

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

(A Florida Limited	d Clability Company)	13/3
The Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion for this Liability Companion for the Liability Companion for this Liability Companion for the Liability Companion for this Liability Companion for the	ny were filed on 03/06/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ibility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or	r 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)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have a Name of New Registered Agent:		enter the name of th
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Ager		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple	te performance of my duties, and	I am familiar with and

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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JUN 27 PM 2: 4 Type of Action

Add

Comove or removed from our records: MGR = Manager AMBR = Authorized Member **Title** <u>Name</u> <u>Address</u> scott deutsch 445 west 40 street # 2189 miami beach, fl 33140 □ Change Coffee Concepts Internationa **AMBR** 16192 Coastal Highway _■ Add Lewes, DE 19958 □ Remove _□ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove _□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be pri If the date inserted in this block does not meet the appl ment's effective date on the Department of State's record	(optional) or to date of filing or more than 90 days after filing.) Pursuant to 60 licable statutory filing requirements, this date will not be list.
record specifies a delayed effective date, but r he 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the ear
d June 21	<u>_</u> .
Signature of a member of all	thorized representative of a member
	•
scott deutsch	

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Filing Fee: \$25.00