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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE_	4/4/2018			
ENTITY	NAME	KSR FL INVESTMENTS LLC	**WA	<i>LK I</i> N**
DOCUM	ENT NUMB	ER		
		PLEASE FILE THE ATTACHED AND RETURN		
<u>xxxx</u>	«xx	Plain Copy Certified Copy Certificate of Status		
		PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTIT	7	
		Certified Copy of Arts & Amendments Certificate of Good Standing	2016 TAL	e 18 ² 0.
		APOSTILLE' / NOTARIAL CERTIFICATION	ARR - U A	Sand Sand
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TOTAL	OWED_\$	25.00 CHECK # 4689		*
Please	call Tina	at the above number for any issues or concerns. Thank	l you so much!	,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KSR FL INVESTMENTS LLC	
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Compariorida document number L18000060934	any were filed on March 7, 2018 and assigned
This amendment is submitted to amend the following:	
-	
A. If amending name, enter the new name of the limited l	iability company here:
he new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address h Name of New Registered Agent:	office address on our records, enter the name of the name:
Nov. Basistand Office Address	22
New Registered Office Address:	Enter Florida street address Florida
	City Zip, Code
ew Registered Agent's Signature, if changing Registered Age	nt:
hereby accept the appointment as registered agent and a rovisions of all statutes relative to the proper and comple ccept the obligations of my position as registered agent a	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NEELAM HEMRAJANI	289 RIDGE ROAD	Add
		RUTHERFORD, NJ 07070	□ Remove
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