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M. MILLIGAN APR 2 0 2018

COVER LETTER

TO: Registration Section Division of Corporation		•	
SUBJECT:	Name of Limite	ed Liability Company	LLC
The enclosed Articles of Am	nendment and fee(s) are subm	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	Jose	Name of Person	
		Firm/Company	
	2775 N	E 1874L 54.	# 404
	Aventura	City/State and Zip Code	180
	E-mail address: (to	be used for future animal peport notificat	· Com
For further information cond	cerning this matter, please cal	l :	
Edwin Name of Pe	Reyes	at (954) 578 - Daytime Te	797/ lephone Number
Enclosed is a check for the t	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

OIVISION OF CORPORATIONS

18 APR 18 PM

The Articles of Organization for this Limited Liability Company were filed on Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Naybis & Pigo Holdingte	4 404 Aventura, Fl. 3318	🗆 Add
		# 404	□ Remove
		Aventura, Fl. 3318	Change
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	anding any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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Note:	extive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ent's effective date on the Department of State's records.	rsuant to 60 not be lis	05.0207 (sted as t
e rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on 90th day after the record is filed.	the ear	lier of:
Dated	April 16th 2018		
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	Hemmare of a member of authorized representative of a member	₽PR	SION
	Edwin Keves		다. 다.
	Typed or printed name of signee	3	- RS-C
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	Page 3 of 3	<u>မှ</u>	DRATI

Filing Fee: \$25.00