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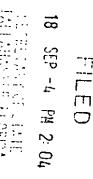
| (Re | equestor's Name) | |
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| PICK-UP | WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration Se Division of Cor | | | |
|--|---|---|--|
| SUBJECT: | Caral Name of Lim | LLC ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | <u> </u> | R Araujo Name of Person | . |
| | | Candi LLC Firm/Company | |
| | 8532 N | Federal Highux | iel |
| , | _ Ft. Laude | rdale FL 3330 City/State and Zip Code | 8 |
| | E-mail address: () | © CICDOUDTI. COM | ication) |
| For further information c | concerning this matter, please ca | all: | |
| Mickole S Name o | CUNTUGO of Person | at (<u>3b5</u>) <u>494</u> Area Code Daytime | - 4337 Telephone Number |
| Enclosed is a check for t | he 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

| <u>Candi Ll</u> | _C |
|---|---|
| (<u>Name of the Limited Liability Compar</u> (A Florida Limited L | ny as it now appears on our records.) iability Company) |
| The Articles of Organization for this Limited Liability Company of Florida document number <u>L18000150547</u> . This amendment is submitted to amend the following: | were filed on 06/19/18 gand-assigned |
| A. If amending name, <u>enter the new name of the limited liabi</u> | 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: (Principal office address MUST BE A STREET ADDRESS) | 3582 N Federal Highway Ft. Lauderdale FL 33308 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 3532 N Federal Highward Ft. Lauderdale FL 33306. |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | |
| Name of New Registered Agent: Test New Registered Office Address: 353 | Dr. R. Arauju 32 N Federal Highway Enter Florida street address |
| It (a) | derdale . Florida # 33308 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 Stepature of New Registered Agent

Page 1 of 3

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> | Name | Address | Type of Action |
|--------------|---------------------|--|-------------------|
| VP_ | Chadwick A. Pendley | 3532 N Ferleral Hyphuru Ft. Lauderdale FL 333U8 | ✓Add |
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| an effective o ote: If the | ate, if other than date is listed, the date date inserted in the effective date on the | e must be specific a iis block does not | nd cannot be price meet the appli | icable statutory f | or more than 90 day | | |
| e record s The 90th | specifies a dela day after the | yed effective record is filed | date, but n i. | ot an effectiv | e time, at 12: | 01 a.m. on t | ne earlier of |
| nted <u>A</u> 1 | igust 30° | h | . 2018 | | | | |
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| _ | <u> </u> | Signature | a heruber or aut | horized representa | tive of a member | | |

Page 3 of 3

Filing Fee: \$25.00