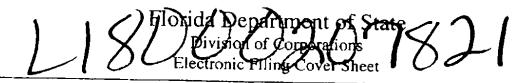
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6393

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGNATION LTR SERVICES LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LTR SERVICES LLC				
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	دن بازن were filed on 08/30/2018 and accompany			
Florida document number L18000207821	and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	13314 Saffron Circle			
(Principal office address MUST BE A STREET ADDRESS)	Palm Beach Gardens, FL 33418			
End.				
Enter new mailing address, if applicable:	Palm Beach Gardens, FL 33418			
B. If amending the registered agent and/or registered of	Tice address on our records enter the arms of the			
registered agent and/or the new registered affice address here	<b>:</b>			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	City , Florida			
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lisa Reiss	13314 SAFFRON COURT	13 De of Action
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			Change
MGR	Lisa Reiss	13314 Saffron Circle	
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			date of filing or ole statutory fil	more than 90 days	after filing.) P	ursuant to 605,020
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September 10		2019				
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