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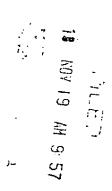
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Special Instructions to	Filing Officer:	
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Office Use Only



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Con	CAQE L	n our records.)	
The Articles of Organization for this Limited Liability Compa	any were filed on	9/19/2018:	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	iability company here	:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the desig	gnation "LLC" or the abbrevia	ilbn "L.L.C."
Enter new principal offices address, if applicable:			N -
(Principal office address MUST BE A STREET ADDRESS))		70 1
			- 1
			
Enter new mailing address, if applicable:		• .	ය ප
(Mailing address MAY BE A POST OFFICE BOX)			····
Maning dancess MATI DEAT (VSI VITTCE DVA)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address because the second of the new registered of the address because the second of the new registered of the address because the second of the seco		ur records, <u>enter the </u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	
	City	Ziq	Code

w Registered Agent's Signature, if changing Registered Agent:

vereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability apany 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>	<u>Address</u>	Type of Action
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tive date, if other than the date of filing: [Rective date is listed, the date must be specific and cannot be prior to the date inserted in this block does not meet the applical ment's effective date on the Department of State's records.	o date of filing or more than 90 days after filing.) Pu	rsuant to 605.0 I not be listed
ecord specifies a delayed effective date, but not e 90th day after the record is filed.	an effective time, at 12:01 a.m. on	the earlier
Novemeber 16, 2018		
Marianella	La Arribard	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00