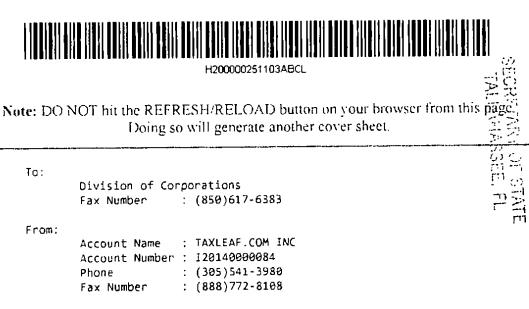
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FK MKT LLC	•		
(Name of the Lin	ited Liability Compa (A Florida Limited	ony as It now appea Liability Company)	rs on our records.)
The Articles of Organization for this Limited Florida document number L19000012356	Liability Company	were filed on 01	
This amendment is submitted to amend the fol	22		
A. If amending name, enter the new name			
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the d	esignation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2500 BISCAYN	NE BLVD APT 1804
		MIAMI, FL 33137	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2500 BISCAYN MIAMI, FL 331	PE BLVD APT 1804
B. If amending the registered agent and registered agent and/or the new registered o	or registered of ffice address here	Tice address on	our records, enter the name of the new
Name of New Registered Agent:	Name of New Registered Agent: ROMAR INTERNATIONAL LLC		
New Registered Office Address:	14334 BISCAY		
		Enter Flori	da street address
	NORTH MIAM		, Florida ³³¹⁸¹
		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

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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>Tltle</u>	<u>Name</u>	Address	Type of Action
AMBR	VAZ DE MELLO KALLIL, FLAVIA	2500 BISCAYNE BLVD # APT 1804	D Add
		MIAMI, FL 33137	Remove
			SEC 2020 Add and 1
		i	Remove
			Change
			3 Add
			Remove
			Change
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			☐ Remove
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H200000 D. If amending any other information, enter change(s) here:	
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	<u> </u>
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) e stamtory filing requirements, this date will not be listed as the
if the record specifies a delayed effective date, but not (b) The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of:
Dated JANUARY, 17TH, 2020	
Havia Vaz de Mello Ka Signature of a member or authori	200 representative of a member
FLAVIA VAZ DE MELLO KA	
Typed or number	

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