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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

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OCT 3 o 2019

T. LEMEUX

## ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION OCT 29 P 4 36

| MARCLA,LLC  | GEORETHA ( FILTAT)<br>TAULAHABSEEL FLORGIA  |
|---|---|
| (Name of the Limited )  | lability Company as it now appears on our records.) lorida Limited Liability Company) |
| The Articles of Organization for this Limited Liabilifold document number 1.19000253577                                     | lity Company were filed on 10/08/2019 and assigned and assigned                       |
| This amendment is submitted to amend the following  | ng:   |
| A. If amending name, enter the new name of the  | e 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 A  | DDRESS)   |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)   |   |
| B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent: | registered office address on our records, <u>enter the name of the new</u>            |
|   |   |
| New Registered Office Address:  | Enter Florida street address  |
| -   | City Zip Code   |
| New Registered Agent's Signature, if changing Regis   |   |
|   |   |

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

10/29/2019 13:53 3052201440

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

| Title         | <u>Name</u>      | <u>Address</u>      | Type of Action |
|---------------|------------------|---------------------|----------------|
| MGR           | MIGUEL ANGEL ALI | 5928 MAYO ST UNIT 3 |                |
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| . If amending any other informati  | on, enter change(s) he                | re: (Attach ad                        | ditional sheets, i                        | f necessary.)  |
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| Effective date, if other than the d<br>(If an effective date is listed, the date must be<br>Note: If the date inserted in this blood<br>document's effective date on the Dep | ck does not meet the appli            | icable statutory                      | or more than 90 day<br>filing requirement | (optional) s after Hing.) Pursuant to 605.020 s, this date will not be listed as |
| the record specifies a delayed<br>) The 90th day after the reco  | effective date, but n<br>rd is filed. | ot an effecti                         | ve time, at 12                            | :01 a.m. on the earlier o  |
| Dated OCTOBER 28   | 2019                                  |                                       |   |  |
|  | 1/Rune                                | Say -                                 | _   |  |
| s  | gnature of a member or au             | thorized represent                    | ative of a member                         |  |
| YAEL RINEMBERG   |                                       |                                       |   |  |

Typed or printed name of signee