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Alternative Research Associates, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tania Morejon Name of Person Alternative Research Associates, LLC Firm/Company 20031 NW 63rd Court Address Hialeah, Florida 33015 City/State and Zip Code tmorejon40@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tania Morejon Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$60.00 Filing Fee, ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

TO ARTICLES OF ORGANIZATION OF

Alternative Research Associates (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 2020 and a Florida document number _____L20000059803 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Tania Morejon Enter new principal offices address, if applicable: 20031 NW 63rd Court (Principal office address MUST BE A STREET ADDRESS) Hialeah, Florida 33015 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the r agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 corprovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar vaccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this do being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liak company has been notified in writing of this change.

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<u>Type</u>
MGR	Tania Morejon	20031 NW 63rd Street	= A
		Hialeah, Florida 33015	□R
MGR	Anthony Medina	83 NW 45 Avenue	\
		Deerfield Beach, Florida 33442	≘ R
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			DA
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing: 06/23/2020 (optional)
he reco ord is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th dated.
Dated	June 23 2020
	Signature of a member or authorized representative of a member
	Tania Morejon

Filing Fee: \$25.00