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TO:

TO: Registration Secti Division of Corpo				
SUBJECT: NCW.	WOVID Recy Name of Limit	Cle Internation and Liability Company	nal LLC	
The enclosed Articles of Ar	nendment and fee(s) are subn	nitted for filing.		
Please return all correspond	ence concerning this matter t	o the following:		
	<u>Joan</u> (Name of Person \ \ \ \ \ \ C \		
	1791 Biour	H RD Ste 905 Address		
	Pompano Be	City/State and Zip Code	7	
	E-mail address: (t	o be used for future annual report notif	DR. (OMALE ALLA ALLA ALLA ALLA ALLA ALLA ALLA	
For further information cor	cerning this matter, please ca	ıll:	5° 4°*	
Joan (ad Name of F	WEII Person	at (Sle1) 777-6 Area Code Daytime	Telephone Number 7	ė
Enclosed is a check for the	following amount:			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Se Division of Co P.O. Box 6327	ection rporations	Street Address: Registration Sec Division of Cor The Centre of T	porations allahassee	
Tallahassee, F		2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New World Recycle International LLC
(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 $\frac{1005\%}{2000}$ and assigned Florida document number $\frac{12000195668}{20000}$ 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address_MUST BE A STREET ADDRESS) 1791 Blown Rd Ste COS 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 new registered agent and/or the new registered office address here: adwell inc Name of New Registered Agent: 1791 Blowd 2d 5+e 905

Enter Florida street address New Registered Office Address: Dyngano Beach, Florida 33069

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	Andrew Cadwell	1791 Blownt Rd Ste 905	\$ Add
		Pompano Brach FL 3300	☐ □Remove
.			□Change
MOR	Joan (adwell	1791 Blant Rd Ste 90	S B Add
		Pumpano Beach FL 331	ÆGRemove
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	10	Signature of	a filember or author	rized representative of	a member		

Filing Fee: \$25.00