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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email Address:\_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LIFESTYLE CAFE, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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	ed Llability Company a (A Florida Limited Liab			<del></del> -	
The Articles of Organization for this Limited Li Florida document number L 21 000	ability Company we:	re filed on4			
This amendment is submitted to amend the following	wing:				
A. If amending name, enter the new name of SoleA IV Loc	100. 110			FED - 9 Pi	- 11 13
The new name must be distinguishable and contain the we	ords "Limited Liability C	ompany," the designa	tion "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applica	ble:	18210	(01/ins	HVENUE.	
(Principal office address MUST BE A STREE	ADDRESS)	18210 SUNNY	15/cs B	each, the	<u>3</u> 3/60
Enter new mailing address, if applicable:		18210 SUNAY	Collins	Avenue	
Mailing address MAY BE A POST OFFICE E	<u> </u>	SVINY	Isles p	Beach, FL	33/60
B. If amending the registered agent and/or reagent and/or the new registered office address	here:				
Name of New Registered Agent:	<u>Sim</u>	on Doil	aN		<del></del>
New Registered Office Address:	18210	Collins	Avenue		
	Sim 18210 Sunny	Enter Florida stre ISPS BCA	et address , Florida	33/60	
New Registered Agent's Signature if changing Du		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 Agept, 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

Title	Name	Address	Type of Action
MER	Simon Doiban	18210 Collins Avenue Sunny Isles Beach, FL	□Add
		Sunny Isles Beach, FL	□Remove
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