

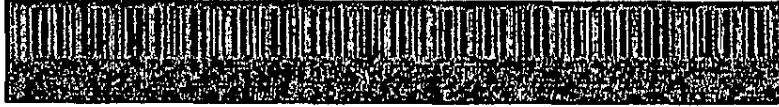
1/13/2015

L15000001183

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((F15000010222 3))



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Account Name : HILL WARD HENDERSON
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Phone : (813)221-3900
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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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SITEZEUS SERVICES, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

2015 JAN 13 A 10:35

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B. BOSTICK

JAN 14 2015

EXAMINER

((H15000010222 3)))

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SITZEUS SERVICES, 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 January 5, 2015 and assigned Florida document number L15000001183.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SITZEUS TECHNOLOGY, LLC

The new name must be distinguishable and end with 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Keenan Baldwin	4010 W. Boy Scout Blvd., Suite 200	<input type="checkbox"/> Add
		Tampa, FL 33607	<input checked="" type="checkbox"/> Remove
MGR	Hannibal Baldwin	4010 W. Boy Scout Blvd., Suite 200	<input type="checkbox"/> Add
		Tampa, FL 33607	<input checked="" type="checkbox"/> Remove
MGR	Tyler McRae	4010 W. Boy Scout Blvd., Suite 200	<input type="checkbox"/> Add
		Tampa, FL 33607	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

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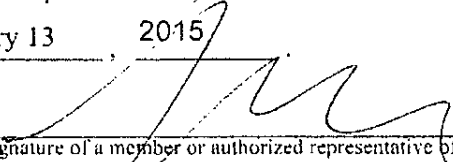
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Four horizontal lines for amending information.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 13, 2015



Signature of a member or authorized representative of a member

Hannibal Baldwin

Typed or printed name of signee

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Filing Fee: \$25.00

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