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2011 FEB 13 PM TO 03
SECRETARY OF STATE

K. SALY FEB 1 4 2017

COVER LETTER

TO:	Registrat Division o			' ń			
SUBJE	CT:	Three	Bros	Scalood	nited Liability Company		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				Name of Lin	nited Liability Company		
The encl	losed Artic	les of Am	endment	and fee(s) are sub	emitted for filing.		
Please re	eturn all co	rresponde	ence conc	erning this matter	to the following:		
					Sturn Phan Name of Person		
					Name of Person		
					There Bros Sea	ntend LLC	
					Firm/Company		
					10184 Vickers	fidge Dr.	
			•		Address	•	
					Orlando, FL 3 City/State and Zip Code	12829	
					•		
		-		E-mail address: ((to be used for future annual	report notificati	ion)
For furth	ner informa	ation conc	erning th	is matter, please c	all:		
Steven Phan			at (40 K)	8 38 - 177 1			
	1	Name of Pe	rson		Area Code	Daylime Te	lephone Number
Enclose	d is a checl	k for the f	ollowing	amount:			
□ \$2 5.	00 Filing I	÷ee l		Filing Fee & ficate of Status	전 \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TO ARTICLES OF O	RGANIZATION	2017FEB 13 PM GO 03
(Name of the Limited Liability Compan (A Florida Limited Li	Seafood y as it now appears on our records. ability Company)	TALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Company v	were filed on4/22/16	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Svp Knives LLC The new name must be distinguishable and contain the words "Limited Liability Contains the words "Limited Liability Contains the words" "Limited Liability Contains the words of the word	ty 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)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		enter the name of the new

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: FILED MGR = Manager AMBR = Authorized Member 2017 FEB 13 PM 單 03 **Title** <u>Name</u> **Address** Type of Action SEURETARY OF STATE TALLAHASSEE. FLORID □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change bbA □_ □ Remove

_□ Change

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ffective de	ate, if other than t	he date of filin	gt			•	optional)		
an effective	date is listed, the date n	nust be specific and	i cannot be	prior to date of	of filing or more	than 90 days	after filing.)	Pursuant to 605	.0207
	date inserted in this effective date on the				tutory filing r	equirement	s, this date	will not be liste	ed as
iocument s	effective date on the	Dehardnent of a	state s rec	orus.					
e record .	specifies a delay	ed effective	date, by	t not an e	ffective tim	ie, at 12;	91 a.m. (	on the earlie	er of
The 90th	n day after the re	ecord is filed.							
Dated	February	8 th	. 201	a .					
				· ·					
		Stur	Mar						
_		Signature of a	member or	authorized re	presentative of	a member	<del></del>	<del></del>	
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Filing Fee: \$25.00