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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Email Address:	
•:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPE GLOBAL L.L.C.

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2025 APR 14 AM 9: 23

OH WILL

Fax: 18134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPE GLOBAL L.L.C.				
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L20000022072	were filed on 01/13/20 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
SPE GLOBAL LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	401 E Jackson St			
(Principal office address MUST BE A STREET ADDRESS)	Tampa FI 33602			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 172681 Tampa FI 33672			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	7.5 7. 0			
Name of New Registered Agent:	23			
New Registered Office Address:	Enter Florida street address			
	, Florida			
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr				

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

Apr 14, 2025 05:35 · To: +18506176383 Page: 3/4 Fax: 18134365206

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	<u>Name</u>	Address	Type of Action
AMBR	Johnson, Cortni	7901 4th St N Ste 300	[]Add
		St. Petersburg, FL 33702	&∏Remove
			□Change
MGR	Johnson, Cortni	401 E Jackson St	⊠Add
		Tampa, FI 33602	□Remove
			□Change
			□Add
			Remove
		<u></u>	□ Change
			□Add
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be ck does not meet the a	applicable statutory	g or more than 90 days		
ne record specifies a delayed effective ord is filed.	date, but not an effect	tive time, at 12:01	a.m. on the earlier of	(b) The 90th day after	er the
Dated April 14th	2025 Ruhan Signature of a member of	5			

Typed or printed name of signee