

L22000162931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

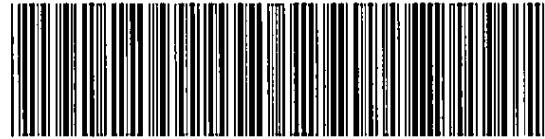
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
OCT 12 2022

Office Use Only



100388837151

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 SEP 29 PM 2:47

RECEIVED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 SEP 29 AM 11:48

FILED





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 6, 2022

INCORPORATING SERVICES, LTD.

*Please honor the original submission date as the file date. Thanks! :)*

SUBJECT: SIGNATURE WEB LLC  
Ref. Number: L22000162931

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 422A00022295

*Please honor the original submission date as the file date. Thanks! :)*

RECEIVED  
DIVISION OF CORPORATIONS  
OCT 11 2022

2022 OCT 11 PM 2:51

RECEIVED

**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com



**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corp-help@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** | 9/29/2022

**PRIORITY** | Regular Approval

**OUR REF.# (Order ID#)** | 1074268

**ORDER ENTITY**  
SIGNATURE WEB LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**  
**SIGNATURE WEB LLC (FL)**

File the attached amendment and provide a certified copy and certificate of status.

**NOTES:**  
\$60.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**  
ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be the initials "MM" or similar, written in a cursive style.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SIGNATURE WEB LLC  
Name of Limited Liability Company.

The enclosed Articles of Amendment and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to the following:

GIANNI SCROCCO  
Name of Person

SIGNATURE WEB LLC.  
Firm/Company

1500 STATE STREET SUITE 203  
Address

SARASOTA FLORIDA 34236  
City/State and Zip Code

GIANNI@SIGNATUREWEB.CO  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIANNI SCROCCO at ( 941 ) 273-7475  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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 Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2022 SEP 29 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FL

SIGNATURE WEB 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 April 05, 2022 and assigned  
Florida document number 1.22000162931

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)**

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:**

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	GIANNI SCROCCO	111 AVE JEAN PAUL LEMIEUX	<input type="checkbox"/> Add
		NOTRE DAME DE ILS PERROT	<input checked="" type="checkbox"/> Remove
		QC CANADA JTW1P4	<input type="checkbox"/> Change
AMBR	KEVIN CHATEL	117 AVE MARIE MARTHE D'ARNAUD	<input type="checkbox"/> Add
		NOTRE DAME DE ILS PERROT	<input checked="" type="checkbox"/> Remove
		QC CANADA JTW1W3	<input type="checkbox"/> Change
AMBR	9273-2668 QUEBEC INC.	14501 AVE CLARK GRAHAM	<input checked="" type="checkbox"/> Add
		S.200 BAIE D'URFE	<input type="checkbox"/> Remove
		QUEBEC CANADA H9X3T1	<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

1. SIGNATURE WEB LLC is controlled, AND HAS  
LEGAL INTEREST by CANADIAN ENTITY 9273-2668.  
Québec INC. (DBA SIGNATURE WEB)

2. 9273-2668 QUEBEC INC. (S) SHAREHOLDERS

• GIANNI SCROCCO

• KEVIN CHATEL

HAVE UNANIMOUSLY decided AND accepted  
CONTROLLING INTEREST SIGNATURE WEB LLC.

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated

OCTOBER 04, 2022

Signature of a member or authorized representative of a member

MR. GIANNI SCROCCO

Typed or printed name of signee