

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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Account Name : SUPERBIZ.COM, INC.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Nome of the United Health	Company	**************************************
(A Florida)	Company as it now appears on our records.) Limited Liability Company)	•
The Articles of Organization for this Limited Liability C Florida document number <u>L07000122728</u>	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor"L.L.C."	rds "Limited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	(ESS)	20 <u>0</u>
		<u> </u>
Enter new mailing address, if applicable:		AN 29 LIARY NASSE
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our records, <u>ente</u> ress here:	間記 ~
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street (address
•		
·	, Florida	Zip Code
New Registered Agent's Signature, if changing Registere	•	-

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 608, 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

Superbiz.com

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	MARIA PEREZ	1094 ALI-BABA AVE	Add
		OPA-LOCKA FL 33054	Remove
			Remove
			Addi
			CO JRemove
			OF STATE Remove
			Romove
			Add
			Remove

Water .

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D. If amending any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)
	,
Dated JANUARY 29 2	013/
electo m	
Signature of a men	nber or authorized representative of a member
ELEIDA M. PEREZ	•
Ту	ped or printed name of signee

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