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(Re	questor's Name)		
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PICK-UP	WAIT	MAIL	
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		
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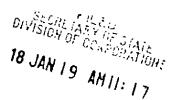
TO:	Registration Se Division of Cor			
CHID HY		ments, LLC		
SUBJE	UI; <u></u>	Name of Lim	ited Liability Company	
The encl	losed Anicles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Stefan C. Camp		
			Name of Person	
		SCC Investments, LLC		
			Firm/Company	
		4507 Furling Lane, Suite 1	13	
			Address	
		Destin, FL 32541		
			City/State and Zip Code	
		chris@leauctions.com		-
			to be used for future annual report notif	ication)
For furth	her information co	oncerning this matter, please co	all:	
Stefan C	Camp		850 502-7879 at ()	
	Name of	f Person	Area Code Daytime	: Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$2 5.	.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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SCC Investments, 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	y Company	were filed on $\frac{1/10/2008}{}$	and assigned	
Florida document number 1.08000003412	·			
This amendment is submitted to amend the following	·•			
A. If amending name, enter the new name of the l	imited liab	ility company here:		
SCC Investements of Florida, LLC				
The new name must be distinguishable and contain the words	Limited Liabil	lity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		4507 Furling Lane, Suite 113		
(Principal office address MUST BE A STREET AD	DRESS)	Destin, FL 32541		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4507 Furling Lane, Suite Destin, FL 32541	113	
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:		<u>e</u> :	cords, enter the name of the new	
New Registered Office Address: 450)7 Furling La	ane, Suite 113		
		Enter Florida street	address	
<u>De</u>	stin		_, Florida ³²⁵⁴¹	
		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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person being added or removed from our records: | Description of the person of the person

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an effective date is listed, the date multiple and the date inserted in this b				
locument's effective date on the I		outains, ining require	The same with the same with	
e record specifies a delaye The 90th day after the re-		an effective time, at	: 12:01 a.m. on t	he earlier of:
January 4	2018			
		→ *		
	Signature of a member or authori			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00



January 9, 2018

SCC INVESTMENTS, LLC STEFAN C. CAMP 4507 FURLING LANE, STE. 113 DESTIN, FL 32541

SUBJECT: SCC INVESTMENTS, LLC

Ref. Number: L08000003412

We have received your document for SCC INVESTMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

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) 245-6051.

Letter Number: 518A00000571

Karen A Saly Regulatory Specialist II