110000042543

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PICK-UP WAIT MAIL
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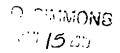
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COVER LETTER

Division of Cor	porations		
. STERILYT	E USA, LLC	•	
SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	KEITH HALUSKA		
		Name of Person	
	STERILYFE USA, LLC		
		Firm/Company	
	1325 N. LIMIE AVE. UNI	ГА	
		Address	
	SARASOTA, FL 34237		
		City/State and Zip Code	
	HALUSKACAD@GMAIL		
		to be used for future annual report notif	ication)
	oncerning this matter, please ca		
KEITH HALUSKA		941 907-9110	
Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne 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

TO:

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

STERILYIE USA, LLC			
(<u>Name of the Lin</u>	(A Florida Limited)	iny as it now appears on our recor Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited lorida document number 1.100000142543	Liability Company	were filed on	and assigned
his amendment is submitted to amend the fo	llowing:		
. If amending name, enter the new name	of the limited liab	ility company here:	
			<u></u>
ne new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
nter new principal offices address, if appl	icable:	1325 N. Lime Ave. Unit A	
Principal office address MUST BE A STRE		Sarasota, FL 34237	1
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	E BOX)	1325 N. Lime Ave. Unit A Sarasota, FL 34237	
If amending the registered agent and gistered agent and/or the new registered of New Registered Agent:		<u>e</u> :	ls, enter the name of the
	1325 N. LIME AVE. UNIT A		
N D :	1325 N. LIME	AVE, UNIT A	
New Registered Office Address:	1325 N. LIME	AVE. UNIT A Enter Florida street addre	2.53

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.

City

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	HALUSKA, KEITH	1325 N. Lime Ave. Unit A	
		Sarasota, FL 34237	
			Remove
			Change.
MGRM	QUINN, SEAN P	522 12th Street West	■ Change
Wester	2011.1.012.1.1	322 Parisheet West	
		Bradenton, FL 34205	
			Remove
			S Change
		 	the Change
			Add
			- Change
			
			Remove
			Change
			a change
			
			Remove
			Change
			to Add
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			Change

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ective date, if other than the d	ate of filing:	(optional) filing or more than 90 days after filing.) Pursuant to 605.0
	k does not meet the applicable statut	tory filing requirements, this date will not be listed
record specifies a delayed he 90th day after the reco		ective time, at 12:01 a.m. on the earlier
JANUARY 3rd	2019	
ed	100	2 marin

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00