L11000029661

| (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: | | | | | |
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Office Use Only



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11 APR -7 PH 2:07

B. BOSTICK

APR 8 2011

EXAMINER

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | |
|---|--|---------------------------------------|-------------|-------------|-------------------|--------------|----------------|
| SUBJ | ECT: Sur | | | cations | , | | |
| Dear ' | Sir or Madam: | | | , | ·F | | |
| Dear | on wadam. | | | | | | |
| The e | nclosed Registered Agent/Registered | Office | Change | e and fee | (s) are submitte | ed for filir | ng. |
| Please | e return all correspondence concernin | g this n | natter to | the foll | owing: | | |
| | Michael Kulick | | | | | | |
| | Name of Person | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | · · | | | | |
| | Firm/Company | | | | | SEU | = |
| | 4260 Village Drive # A | | | | | ≥ ≥ | APR -7 PH 2:07 |
| - | Address | | | | | 25 | 70 |
| | | | | | | 25.5 | ٺ- |
| | | | | | | | |
| | Delray Beach, Fl 33445 | <u>.</u> | | | | 71 | === |
| *************************************** | City/State and Zip Code | | | | | 57 | $\dot{\omega}$ |
| | ony/state and hip code | | | | | 골쏡 | Θ. |
| | | | | | | Ä | ~ |
| | Mkkulick@aol.com mail address: (to be used for future annual report | | | | | | |
| E | -mail address: (to be used for future annual report | t notificati | on) | | | | |
| For fu | rther information concerning this ma | tter, ple | ase cal | 1: | | | |
| | Michael Kulick | at (_ | 954 | _) | 673-35 | 500 | |
| | Name of Person | | | Area Code | & Daytime Telepho | one Number | |
| | | | | | | | |
| | STREET/COURIER ADDRESS: | | | | ADDRESS: | | |
| | Registration Section | | | gistration | | | |
| | Division of Corporations Clifton Building | | | D. Box 63 | Corporations | | |
| | 2661 Executive Center Circle | | | | Florida 32314 | | |
| | Tallahassee, Florida 32301 | | 1 &1 | ianassee, | F1011ua 32314 | | |
| | Enclosed is a check for the follow | ing am | ount: | | | | |
| | \$25 Filing Fee | | \$ 5 | 55 Filing | Fee & Certifie | ed Copy | |
| INHS18 | (5/08) | | | | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Superior Publ | ications, LLC | | | | | |
|--|---|---------------------------------------|-------------|---------------------|--|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | iny as it now appea Liability Company) | ars on our record | <u>s.</u>) | | | |
| The Articles of Organization for this Limited Liability Company | were filed on | March 9, 20 | 11 | and assigned | | |
| Florida document numberL11000029661 | | | | | | |
| This amendment is submitted to amend the following: | | | | | | |
| A. If amending name, enter the new name of the limited liab | oility company he | ere: | | | | |
| The new name must be distinguishable and end with the words "Lim | ited Liability Comr | nany " the designat | ion "LLC" | or the abbreviation | | |
| L.L.C." | ned Elabiniy Comp | any, the designar | ion EEC | of the above value | | |
| Enter new principal offices address, if applicable: | 200 Knuth R | Road Suite 116 | <u> </u> | | | |
| (Principal office address MUST BE A STREET ADDRESS) | Boynton Bea | ach, Fl 33436 | TAS. | | | |
| | | | <u> </u> | | | |
| | | | S. | 1 | | |
| Enter new mailing address, if applicable: | <u> </u> | | 00 m | フ : | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | 7 | II peri | | |
| | | · · · · · · · · · · · · · · · · · · · | S = 2 | .; | | |
| | | | AOI A | 7 | | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | | our records, en | iter the r | ame of the ne | | |
| The state of the s | <u>~</u> . | | | | | |
| Name of New Registered Agent: | | | | | | |
| New Registered Office Address: | | | | | | |
| | Enter Florida street address | | | | | |
| -1-44-1 | , Florida | | | | | |
| | City | | Z | ip 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 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

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

| <u> itle</u> | <u>Name</u> | Address | Type of Action |
|---------------|---|---|----------------|
| | | | Add Remove |
| | | | Add Remove |
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| | | <u> </u> | Remove |
| . If amer | nding any other information, enter chan | age(s) here: (Attach additional sheets, if necessary) | 7 7 |
| _ | | . IDA | 07 |
| ated | | | |
| | mund | Wik | |
| | Michael La | er or authorized representative of a member | |

Page 2 of 2

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2011

MICHAEL KULICK 4260 VILLAGE DRIVE #A DELRAY BEACH, FL 33445

SUBJECT: SUPERIOR PUBLICATIONS, LLC

Ref. Number: L11000029661

We have received your document for SUPERIOR PUBLICATIONS, 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):

The registered agent must sign accepting the designation.

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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 611A00007805