

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 Phone : (800) 221-2972 : (888)692~9256 Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROFESSIONAL INTERNATIONAL SERVICES, LLC

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DCT 14 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

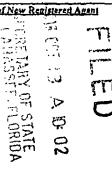
PROFESSIONAL INTERNATIONAL SERVICES, LLC

(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 07/25/2001 Florida document number L11000085262 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The Suited Closer LLC The new name must be distinguishable and end with 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 malling address, if applicable: (Mailing address MAY RE 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 Man Registered Agent: New Registered Office Address: Enter Florida street address Florida City Zio 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 filled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been married in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3



If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manage Authorized Member being added or removed from our records:			s of each Manager or		
	MGR = Manager AMBR = Authorized Member				
Title	Name	Address	Type of Action		
Managing Nember	John Chenyit	2327 KeHIC Dr Or lando, FL 32	BAdd 8 35 Remove		
Vanaging Vember	, Sylvia Rivera,	1601 Johns Lake rd	ES Add		
		.1601 Johns LAKE rd .#1037 .Clermont, F/347/ L MEMBERS	Remove		
NO	ADDITION OF	L MEMBERS	🖸 Add		
			Other		
			_D Add		
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	Page 2 of	ricori	Þ Ö		

	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
(Effective date, if other than the date of filing: Septem ber 23, 2016 (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
	Dated September 23 2016
	Q BH-
	John Cherry III
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00

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