Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : 120070000160 Phone : (800)494-3124

Fax Number : (305)675-2811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO

TO
ARTICLES OF ORGANIZATION
OF

H15000252490 3

	RODE L			
(<u>Name of the Limit</u>	ed Liability Company ((A Florida Limited Liab	is it now appo ility Company	ars on our records.)	
The Articles of Organization for this Limited Lia Florida document numberL11000099072	ability Company we	re filed on _	AUGUST 29, 2011	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability	company l	nerc:	
The new name must be distinguishable and contain the wo	ords "Limited Liability C	ompany." the	designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applies	able: _		·	
(Principal office address MUST BE A STREE	T ADDRESS)	<u> </u>	+	
	_			
Enter new mailing address, if applicable:	_	751 WAS	HINGTON AVENUE	
(Mulling address MAY BE A POST OFFICE I	<u>BOXI</u>	міамі в	EACH, FL 33139	
B. If amending the registered agent and/or the new registered of	fice address here:		n our records, enter	the name of the new
Name of New Registered Agent:	GILBERT OBI	מוני		
New Registered Office Address:	751 WASHINGTON AVENUE			
	Enter Florida street address			
	MIANII BEAC	H City	, Florida	33139 Zip Code
New Registered Agent's Signature, if changing R	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regi.	er and complete pe	rfor <mark>mance</mark> o	of my duties, and I am	familiar with and

If Changing Registery Agent, Signature of New Registered Agent

Page 1 of 3

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	MANDY CALARA	928 OCEAN DRIVE	
		MIAMI BEACH, FL 33139	■ Remove
			☐ Change
	,		☐ Remove
			☐ Change
			D Add
			☐ Remove
			Change
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			□ Remove
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			☐ Change

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. OCTOBER 21 2015	_	H15000252490.3
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