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(Re	equestor's Name)	<u>-</u> , <u>-</u>
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COVER LETTER

Division of Co	rporations		
SPRIM Su SUBJECT:	rategy & Intelligent Innovation	LLC	
SUBJECT.	Name of Lir	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Ivan Jarry		
		Name of Person	
	SPRIM US LLC		
	Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asse return all correspondence concerning this matter to the following: Ivan Jarry		
	12000 Research Parkway,	Suite 132	
		Address	
	Orlando, FL 32826		
		City/State and Zip Code	
For further information of		·	ication)
Rae Slattery			
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee			

MAILING ADDRESS:

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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

SPRIM Strategy & Intelligent In-				
Name of the Lin	mited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.		
The Articles of Organization for this Limited	Liability Company were filed on Jan	mary 3, 2013	and	assigned
Florida document number 4.13000001235			11.10	a neglica
his amendment is submitted to amend the fo	ollowing:			
. If amending name, enter the new name	of the limited liability company he	<u>re</u> :		
SPRIM US LLC	-	_		
he new name must be distinguishable and contain the	words "I imited Liability Company," the de-	esignation "ELC" or the abb	reviation	"I I ("
nter new principal offices address, if appl				
Principal office address MUST BE A STRE	<u>LET ADDRESS)</u>			
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	E BOX)		`	
				7. j
			ù.,	47"
. If amending the registered agent and	d/or registered office address on	our records, enter t	he nan	ne offithe r
gistered agent and/or the new registered	office address here:			
			:	<u>.</u>
Name of New Registered Agent:	Corndor, Legal Chartered			47
New Registered Office Address:	907 E. Strawbridge Ave., Suite 101			
	Enter Florie	la street aldress		
	Melbourne	Florida 329	Н	
	City		Zir Coc	Je.

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard K. Brenner	12000 Research Parkway, Suite 13:	Add
		Orlando, FL 32826	■ Remove
			Change
			□ Remove
			Change
			Add
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fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing	(optional)	
te: If the date inserted in this block does not meet the applicable statutory	filing requirements, this date will n	ot be listed
cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effecti The 90th day after the record is filed.	ve time, at 12:01 a.m. on th	ne earlier
The Sour day after the record is filed.		
ted 4-7 . 2017		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00