## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

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Fax Number

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **SGI-SINGAPORE LLC**

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## **COVER LETTER**

TO: Registration Section Division of Corpora	
SUBJECT: SGI-SINGAF	PORE LLC
	(Name of Limited Liability Company)
	ndment and fee(s) are submitted for filing.  ce concerning this matter to the following:
<u>Im</u>	nelda Vasquez
	(Name of Person)
Le	egalzoom.com, Inc
	(Firm/Company)
10	00 W. Broadway Suite 100
<del></del>	(Address)
G	elendale, CA 91210
	(City/State and Zip Code)
For further information concer	ning this matter, please call:
Imelda Vasquez	at (323 ) 962-8600 ext 7950
(Name of Pers	(Area Code & Daytime Telephone Number)
Enclosed is a check for the foll	lowing amount:
\$25.00 Filing Fee	\$30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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

SGI-SINGAPORE LLC	ility Company as it now appears o		
(A Flori	da Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability	y Company were filed on 02/12	/2013 and assigned	
Florida document number <u>L13000021998</u>	*		
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,	" the designation "LLC" or the abbreviation	
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
<del></del>	(Enter Florida street address)		
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register	ered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	and complete performance of a dagent as provided for in Chap ered office address, I hereby co	my duties, and I am familiar with and ter 608, F.S. Or, if this document is	
	(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 MGRM = Managing Member

<u>Title</u>	Name		Address		Type of Action
MGRM	Brian Abell		804 Sabinas Court Georgetown, TX 78628		Add Remove
					_Ø Add Remove _
	<del></del>	· · · · · · · · · · · · · · · · · · ·			Add Remove
				-	Add Remove
	<del></del>	· · · · · · · · · · · · · · · · · · ·			Add Remove
					∏Add Remove
D. 11 ame	ending any other in	ormation, enter change	s) here: (Attach additional sheets, if ne	cessary.) 	
<u>-</u>					- - -
Dated	6/6/2013	· · · · · · · · · · · · · · · · · · ·	·,	 Šs	- 
			r authorized representative of a member	ECRETARY	3 JUN -
		Typed or	Brady A. Hart printed name of signee Page 2 of 2	ΩŌ	LED 6 MH 10: 27
		Fili	ng Fee: \$25.00	F STATE FLORID	: 27