Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SUPERBIR/COM, INC.

Account Number : I20070000160 : (800)494-3124 Phone 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.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN:: WRM USA LLC

Certificate of Status 0 0 Certified Copy Page Count Estimated Charge \$25.00

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

WRM US			
(Name of the Limited Liability Compan (A Florida Limited I)	y as it now appea	ers on our records.)	The the
(A Pioridii Cilinteti D	anning Company)		Care Q
The Articles of Organization for this Limited Liability Company	were filed on	MAY 13, 20 <u>13</u>	and assigned_
Florida document numberL13000069796	_		
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company h	nere:	
_ <u> </u>			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			<del>.</del>
(Principal office address MUST BE A STREET ADDRESS)			
,			<u>.</u>
	,		
Enter new mailing address, if applicable:			_
· · · · · · · · · · · · · · · · · · ·			
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>		1
	-		
B. If amending the registered agent and/or registered of	ties adduses o	a our roosede onto	the name of the new
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	iice audress o	ni oui recoras, <u>ciner</u>	the mine of the space
registered agent anaron the new registered white battle	<u>-</u> '		
Name of New Registered Agent:			<del></del>
New Registered Office Address:			<del></del>
,	Enter Fl	lovida struet address	
		Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent;			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance o provided for in	of my duties, and Lam Chapter 605, F.S. Or	familiar with and v. if this document is
. If Char	iging Registered	Agent, Signature of New I	Registered Agent
Page	of 3	1147	100167710 1
	1	H170	000287729 3

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

H17000287729 3

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	DALINAJARA OYAMA HOMMA	2255 GLADES ROAD, STE 324A	<b>=</b> Add
	DE ARAUJO BAUER	BOCA RATON, FL 33431	
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<u>.</u>			Add
			□ Remove
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<del></del> .			□ Remove
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e: 11°C	date, if other than the date of filing:
ecore e 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea oth day after the record is filed.
d	OCTOBER 31 2017
	Signature of a member or authorized representative of a member
	1 / "

Page 3 of 3