L13000077635

| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | | |
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| Special Instructions to | Filing Officer: | |
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COVER LETTER

| | Registration Sec Division of Corp | | | |
|------------|--------------------------------------|--|---|--|
| cimiec | SP Handleba | ar, LLC | | |
| SUBJEC | | Name of Lim | ited Liability Company | |
| The enclo | sed Articles of A | Amendment and fee(s) are sub | mitted for filing. | |
| Please ret | urn all correspor | ndence concerning this matter | to the following: | |
| | | Nicholas P. Sardelis, Jr., E. | squire | |
| | | | Name of Person | |
| | | Sardelis and Bowles, L.L.F | o. | |
| | | | Firm/Company | |
| | | 2033 Main St., Ste. 502 | | |
| | | | Address | |
| | | Sarasota, FL. 34237 | | |
| | | | City/State and Zip Code | |
| | | nps@sardelisandbowles.cor | | |
| | | E-mail address: (| to be used for future annual report notific | cation) |
| For furthe | er information co | ncerning this matter, please ca | all: | |
| Nicholas | P. Sardelis, Jr. | | 941 366-1200 at () | |
| | Name of | Person | at () Area Code Daytime | Telephone Number |
| Enclosed | is a check for the | e following amount: | | |
| \$25.0 | 0 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 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

| SP Handlebar, LLC | | | |
|--|--|------------------------------|-------------|
| (Name of the Limited Liab) (A Flori | ility Company as it now appears on our records. da Limited Liability Company) |) | |
| The Articles of Organization for this Limited Liability Florida document number L13000077635 | Company were filed on May 29, 2013 | and assigned | |
| This amendment is submitted to amend the following: | - | | |
| A. If amending name, enter the new name of the lir | mited liability company here: | | |
| The new name must be distinguishable and contain the words "Li | imited 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 ADD | DRESS) | <u> </u> | |
| | , | 36 A |)] |
| | | 7 000 | 5 |
| Enter new mailing address, if applicable: | | 30 OF C | 37 |
| , 11 | | | <u>Ş</u> E |
| (Mailing address MAY BE A POST OFFICE BOX) | | | 77 |
| | | · A | <u>></u> |
| | | 40 $\frac{1}{2}$ | |
| B. If amending the registered agent and/or reg registered agent and/or the new registered office ad | | enter the name of the | e ne |
| registered agent and/or the new registered office ad | ur ess ner e. | | |
| | | | |
| Name of New Registered Agent: | M. Property | | — |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | , Flo | rida | |
| | City | Zip 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 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> | <u>Address</u> | Type of Action |
|--------------|--------------------|---------------------|----------------|
| MGR | Gregory A. Orquera | 16 S. Orange Ave. | ⊟ Add |
| | | Sarasota, FL. 34236 | Remove |
| | | | Change |
| MGR | Steve Pileggi | 16 S. Orange Ave. | Add |
| | | Sarasota, FL. 34236 | ■ Remove |
| | | | ☐ Change |
| | | | □ Add |
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| fecti | e date, if other than the date of filing: (opti | onal) | |
| ote: | thive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, thin it's effective date on the Department of State's records. | r filing.) Pursuant to e s date will not be l | 605.02 isted a |
| | ord specifies a delayed effective date, but not an effective time, at 12:01 and one of the record is filed. | a.m. on the ea | rlier |
| ated _ | April 25, 2018. Messay Result B. Eignature of a member or authorized representative of a member | | |
| | M. 02. DG 10:00 | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00