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## **COVER LETTER**

Division of Co	rporations			
S&S FL H SUBJECT:	oldings, LLC			
		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	•	
Please return all correspo	ondence concerning this matter	to the following:		
	Shivon Patel, Esq.			
	<del></del>	Name of Person	<del>.</del>	
	The Principal Law Firm, P	.I		
		Firm Company		
	4907 International Parkway, Ste 1061			
	<del></del>	Address		
	Sanford, Ft. 32771			
		City State and Zip Code		
	speera/a gmail.com			
	E-mail address: ()	to be used for future annual report noti	fication)	
For further information of	concerning this matter, please ea	all:		
Shivon Patel, Esq.		407 322-3003		
Name (	of Person	at ()	e Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

S&S FL Holdings, LLC				
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on 10/11/2013  Horida document number 1.13000144009		and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "E.E.C" (			
Enter new principal offices address, if applicable:	···	2019 SEC		
(Principal office address MUST BE A STREET ADDRESS)	<u></u>			
		27 <u>-</u>		
		ASST A TO		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>		
	<del></del>			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.		enter the name of the no		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		ida		
	Cus	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
NIGR	Jacob Moral	2550 Granada Circle E.	□ Add
		St. Petersburg, F1, 33712	<b>-</b>
			☐ Change
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change
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E. Effect	ive date, if other t	than the date of filing	<i>!</i> ;		(optional)	
Note:	If the date inserted	than the date of filing e date must be specific and in this block does not m on the Department of S	neet the applicabl	face of filing or more the e-statutory filing requ	in 90 days after filing.) Pur firements, this date will	suant to 605,9207 (3)th not be listed as the
		delayed effective d the record is filed.		n effective time,	at 12:01 a.m. on	the earlier of:
Doted	July 3rd		2019			
,	- <del></del>		0			
		Signature of a r	Telennember or authoriz	ed representative of a n	nember	<del></del>
	Sameer H. Pee			•		

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Typed or printed name of signee

Filing Fee: \$25.00