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| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
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SECRETARY OF STATE

COVER LETTER

| TO: Registration Se Division of Cor | | | |
|--|---|--|--|
| SUBJECT: A STEP | ABOVE COMPANION SERVICES, LLC | | |
| SUBJECT: | Name of Limited Liability Company | | |
| | Amendment and fee(s) are submitted for filing. ondence concerning this matter to the following: | | |
| | Kevin E. Wimberly | | |
| | Name of Person | | , |
| | SC UpLift Community Outreach | | |
| | Firm/Company | | |
| | PO Box 3728 | | |
| | Address | | |
| | Columbia, SC 29230 | | |
| | City/State and Zip Code | 2015, SEC | n |
| | kevinwimberly@scuplift.org | JAN | |
| | E-mail address: (to be used for future annual report notification) | ARY -6 | AL STATE OF THE ST |
| For further information c | concerning this matter, please call: | 5 JAN -6 PM CGETARY OF LAHASSEE FI | |
| Kevin E. Wimberly | 803 691-4742 | 3: 1 STAT |) |
| Name o | of Person Area Code Daytime Telephone Number | <u>υ</u> | |
| Enclosed is a check for the | he following amount: | | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy Certificate of | | |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A STEP ABOVE COMPANION SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)

| (A Florida Limite | ed Liability Company) | |
|--|---|---|
| The Articles of Organization for this Limited Liability Compa Florida document number <u>L14000036982</u> | ny were filed on March 4, 2014 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited li | ability company here: | |
| The new name must be distinguishable and end with the words "Limited L | iability Company," the designation "LLC" or the a | ubbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address h Name of New Registered Agent: New Registered Office Address: | | the name of the new SECRETARY OF SILLAHASSEE FLORE |
| | , Florida City | Zap 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

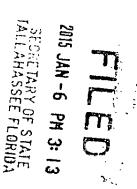
MGR = · Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action **MGR** Kevin E. Wimberly P.O. Box 3728 ■ Add Columbia, SC 29230 ☐ Remove SC UpLift Community Outr MGR P.O. Box 3728 _□ Add Columbia, SC 29230 **■** Remove _□ Add ☐ Remove □ Add ☐ Remove

☐ Remove

| D. If a | mending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|---------|--|
| | See Attachment A "Purpose for Amendment" |
| | |
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| | |
| | |
| (The | ective date, if other than the date of filing: |
| Dat | ed , |
| | Di E.W lil |
| | Signature of a member or authorized representative of a member |
| | Kevin E. Wimberly |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00



Attachment A: Purpose for Amendment to Articles of Organization

The primary relationship between the nonprofit owner and the LLC is that the President & CEO, Kevin E. Wimberly, of the nonprofit corporation shall be the Manager of the LLC. If at the end of the LLC's fiscal year, sufficient revenue remains in the LLC after payment of all expenses incurred by the LLC, these proceeds will be donated to the parent organization in support of the parent's exempt purposes and programs. This payment is subject to change should the parent organization and the LLC Managers determine, by mutual agreement that a greater portion of revenues in excess of expense can be used to improve operations of the LLC in the State of Florida.

The managing partner, Kevin E. Wimberly, is authorized to select other managing partners as needed based on the growth and expansion of the operations of the LLC. As this occurs, an annual review of revenue sufficiency for the sustainability of the LLC will be assessed by all partners so that all costs incurred by the LLC, inclusive of expansion efforts, will be sufficiently covered. Deferred payment of portions of revenues designated to the parent organization may be incorporated in these negotiated agreements.

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SECRETARY OF STATE
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