Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Тэ:	Division of Corporations	3/7 / - (*) - (*)	n J
	Fax Number : (850)617-6383	r	Ū
From:			_
	Account Name : HUNTON, ANDREWS, KURTH, LLP	1	1.22
	Account Number: 120000000236 Phone: (305)810-2542	<u>-</u> 7.	0
	Fax Number : (305) \$10-2460	}	~
*Enter the	email address for this business entity to be used report mailings. Enter only one email address ple	for fi	uture

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUCRO CAN SOURCING LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SUCRO CAN SOURCING LLC		any as it now appears	on our records.)	
(ISHM VI III) BILL	(A Florida Limited	any as it now appears Liability Company)	,	
The Articles of Organization for this Limited	Liability Company	were filed on Mar	ch 27, 2014	and assigned
Fiorida document number L14000050742	······································			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited <u>lia</u> t	oility company her	<u>e</u> :	
N/A				
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the des	ignation "LLC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A		
			<u> </u>	<u></u>
			2	· 2
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Enter new mailing address, if applicable:		N/A	آ :	Fil
(Mailing address MAY BE A POST OFFICE BOX)				
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B. If amending the registered agent and			our records, <u>enter</u>	the name of the n
registered agent and/or the new registered	office address ner	<u>·e</u> .		
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Florid	la street address	
			, Florida	
		Ciţ		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	<u>L</u>		
I hereby accept the appointment as register	ed agent and agr	ree to act in this co	ipacity. I further ag	ree to comply with a familiar with and

provisions of all statutes relative to the proper and complete performance of my duties, 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

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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>	Address	Type of Action
N/A	N/A	N/A	☐ Add
			□ Remove
			Change
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ective date, if other than the d	N/A	: (optional)	Ü "
effective date is listed, the date must be	se specific and cannot be prior to date of filing	or more than 90 days after filing.) F	ursumt to 605.03
e: If the date inserted in this bloc ument's effective date on the Dep	k does not meet the applicable statutory		_
ument's effective date on the Dop	aranem of state steedids.	ا' خ	₹2
record specifies a delayed enter the record	effective date, but not an effecti d is filed.	ve time, at 12:01 a.m. or	n the earlier
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September, 14	2018		
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	- Carlotte		
Si	gnature of a member or authorized represent	alive of a member	
Jonathan Taylor			
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Filing Fee: \$25.00