L14000146004

Florida Department of State
Division of Corporations
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SILVERNAP, LLC

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August 8, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SILVERNAP, LLC
8362 PINES BOULEVARD
#359
PEMBROKE PINES, FL 33024

SUBJECT: SILVERNAP, LLC
REF: L14000146004

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please disregard previous letter sent by mistake.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H17000208054
Letter Number: 517A00016066

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TALLAHASSEE FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Silvercap, LLC, a Florida limited liability company
(Name of the Limited Liability Company as it appears on our records)
(A Florida limited liability company)

The Articles of Organization for this Limited Liability Company were filed on September 18, 2014 and assigned Florida document number L14000146004.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office 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)

8362 Pines Blvd #359
Pembroke Pines FL 33024

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: James Loon

New Registered Office Address: 8362 PINES BLVD. # 359
(Enter Florida street address)

PEMBROKE PINES, Florida 33024
(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.

James Loon
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

Title	Name	Address	Type of Action
MGR	James Leon	8362 Pines Boulevard, Suite 359	☒ Add
		Pembroke Pines, FL 33024	☐ Remove
			☐ Change
MGR	Karen Martin	8362 Pines Boulevard, Suite 359	☐ Add
		Pembroke Pines, FL 33024	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 5/22/2017

Signature of [illegible] or authorized representative of a member

SANDRA ONTANEDA
Typed or printed name of signee

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