

L14000149218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

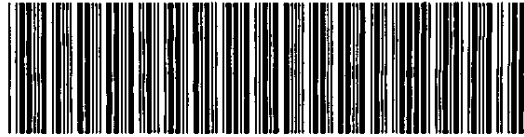
(Business Entity Name)

(Document Number)

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2015 JUL 21 AM 11:58
SOS OF FLORIDA
TALLAHASSEE, FLORIDA

N. Culligan JUL 22 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUPERIOR IMPROVEMENT, L.L.C.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JANDEL O. DIAZ

Name of Person

SUPERIOR IMPROVEMENT, L.L.C.

Firm/Company

4267 N BROWNIE DRIVE

Address

WEST PALM BEACH, FL 33406

City/State and Zip Code

jandeldiaz@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JANDEL O. DIAZ

561

202-9074

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUPERIOR IMPROVEMENT, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 09/24/2014 and assigned
Florida document number L14000149218.

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 offices address, if applicable:

4267 N BROWNIE DRIVE

(Principal office address MUST BE A STREET ADDRESS)

WEST PALM BEACH, FL 33406

Enter new mailing address, if applicable:

4267 N BROWNIE DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

WEST PALM BEACH, FL 33406

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:

New Registered Office Address:

4267 N BROWNIE DRIVE

Enter Florida street address

WEST PALM BEACH

City

Florida 33406

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>	<u>Type of Action</u>
MGM	JANDEL O. DIAZ	4267 N BROWNIE DRIVE	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33406	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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2015 JUL 21 AM 11:58
CLERK OF DISTRICT COURT
SOUTH DAKOTA
SIOUX FALLS, S.D.

E. Effective date, if other than the date of filing: 07/15/2015 (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.

(b) The 90th day after the record is filed.

Dated JULY 15 2015

Signature of a member or authorized representative of a member

JANDEL O. DIAZ

Typed or printed name of signee