Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

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Account Name : SUPERBIZ.COM, INC.

Account Number: I20070000160

: (800)494-3124

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SINO & CO. LLC

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SINO &	CO. LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited L	ny as it now appears (lability Company)	on our records.)				
The Articles of Organization for this Limited L. Florida document number		were filed on	03/06/2015	and assi	gned		
This amendment is submitted to amend the following	lowing:						
A. If amending name, enter the new name of	f the limited liab	lity company her	<u>0</u> :				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the des	ignation "LLC" or the ab	breviation "L	L.C."		
Enter new principal offices address, if applic	235 SUNRISE AVE #2044 PALM BEACH, FLORIDA 33480 235 SUNRISE AVE #2044						
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:							
							(Mailing address MAY BE A POST OFFICE
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		AUG -3	DEA				
New Registered Office Address:	235 SUNRISE		la street address			_; '.	
	PALM BEACH					· No. 50 P	
		City				_	
New Registered Agent's Stanature. If changing I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	ed agent and agreer and complete istered agent as pregistered office change.	ee to act in this co performance of m provided for in Ch	ny dutles, and I am j appter 605, F.S. Or, confirm that the lin	familiar wit if this docu	h and ment i ty		
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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
AMBR	LOUIS DICARLO	2417 HOLLYWOOD BOULEVARD	
		HOLLYWOOD, FLORIDA 33020	■ Remove
			Change
MGR	RUGGERO BOTTI	2417 HOLLYWOOD BOULEVARD	
		HOLLYWOOD, FLORIDA 33020	■ Remove
			Change
AMBR	LOUIS DICARLO	235 SUNRISE AVE #2044	Add
		PALM BEACH, FLORIDA 33480	Remove
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			Remove
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Effective date, if other than t (If an effective date is listed, the date i	he date of filing	g:	. to date of filling	· · · · · · · · · · · · · · · · · · ·	(optional)			- /34