115000046561

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
SPINNDE			
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	Ман Сена		
		Name of Person	
		Firm/Company	
	1101 S Belcher Rd. Suite	FI	
		Address	
	Largo, FL 33771		
	mcetta@gosbsit.com	City/State and Zip Code	
		to be used for future annual report not	illication)
For further information c	oncerning this matter, please o	all:	
Matt Cetta		727 6980720 at ()	
Name of Person		at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	7	The Centre of T	l'allahassee
Tallahassee, I	15 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPINN	DER	LLC
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(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 03/16/2015 and assigned Florida document number $\frac{115000046561}{1}$ 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 "LLC" Enter new principal offices address, if applicable: 1101 S. Belcher Rd. Suite F1 (Principal office address MUST BE A STREET ADDRESS) Largo, FL 33771 1101 S. Belcher Rd. Suite F1 Enter new mailing address, if applicable: Largo, FL 33771 (Mailing address MAY BE A POST OFFICE BOX) 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: 1101 S. Belcher Rd. Suite F1 New Registered Office Address: Enter Florida street address Largo 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>	Name	<u>Address</u>	Type of Action
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			Remove
			□Change
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			□Remove
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Note: If	e date, if other than the date of filing:
	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
e record s rd is filed	
e record s rd is filed Dated	11/22/2021.
iu is inea	

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Filing Fee: \$25.00