## L15000176276

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:		S ENTERPRISES, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		PERI BANDAZIAN		
			Name of Person	
		SCORPIUS ENTERPRISE	ES, LLC	
Firm/Company				
175 BANYAN BAY DRIVE				
			Address	
		ST PETERSBURG, FL 33	705	
			City/State and Zip Code	
		PBANDAZIAN@GMAIL.	COM to be used for future annual report notifi	
For further in	iformation c	oncerning this matter, please co		cation)
PERI BANI	DAZIAN		917 443-3803	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCORPIUS ENTERPRISES, LLC	•	
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited I	iability Company were filed on OC1	OBER 16, 2015 and assigned
Florida document number 1.15000176276	·	
This amendment is submitted to amend the fol	lowing:	•
A. If amending name, enter the new name of		1 T
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	gnation "LI,C" or the abbreviation "Li, C,"
Enter new principal offices address, if appli	cable:	
( <u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	
Enter new mailing address, if applicable:		Cotto
(Mailing address MAY BE A POST OFFICE	(ROX)	
B. If amending the registered agent and registered agent and/or the new registered o	or registered office address on o	ur records, enter the name of the new
Name of New Registered Agent:	PERIBANDAZIAN	
New Registered Office Address:	175 BANYAN BAY DRIVE	
<del></del>	Enter Florid	i street address
	ST PETERSBURG	, Florida <sup>33705</sup>
	Chy	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.

My David Con Or The 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>	Type of Action
AMBR	ROBERT MORGAN	175 BANYAN BAY DRIVE	
		ST PETERSBURG, FL 33705	Remove
			Change
			Add
			□ Remove
			Change
			T L Company
		·	
			TILE PH 2: 42
			□ Remove
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be pri block does not meet the appl	icable statutory filing	(optional) re than 90 days after filing requirements, this date	.) Pursuant to 605,0207 (3)
document seriective date on the	Department of State's record	15.		
the record specifies a delayed The 90th day after the re	ed effective date, but record is filed.	oot an effective ti	me, at 12:01 a.m.	on the earlier of:
Dated JULY 10	2017  2017  Signature of a member or au	·		
······				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00