Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000300654 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE IN

Account Number : I20000000146

: (305)444-4994

Phone Fax Number

; (305)444-4977

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

F	ma	11	Ad	a	ro		
	ша		- H L	ш.		33	•

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SEGMENT LLC.

HEUCIVED

DEC'21 PM 3: 01

ORLANDOFS AND

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

DEC 2 2 2015

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

P. 001

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEMGENT LLC.	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 11/17/2015 and assigned
Florida document number L150000193015	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ullity company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	150 S. MONACO PKWY UNIT G APT 305
Principal office address MUST BE A STREET ADDRESS)	DENVER, CO 80224
	5
Enter new mailing address, if applicable:	150 S. MONACO PKWY UNIT GAPTIOS
Mailing address MAY BE A POST OFFICE BOX)	DENVER, CO 80224
	## # □
	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
, —	
New Registered Office Address:	Enter Florida street address
	, Florida
	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.

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>	Address	Type of Action
MGR	CHANGE OF ADDRESS	150 S. MONACO PKWY	
		UNIT G APT 305	☐ Remove
		DENVER, CO 80224	
		***	☐ Change
			□ Add
			Remove
			□ Change
			Add Add
			Remove
			21 Chambre Oct
			- Rose
			☐ Remove
			☐ Change
····			
			Remove
		<u> </u>	Change
			□ Remove
			☐ Change

am.	ending any	other info	rmation, er	nter ch	ange(s)	here:	(Attach	additio	nal shee	ets, if ne	cessary	.)	
-													
-													
-													
-					·- <u>-</u>								
-									<u></u>		<u>-</u> -		
_													
_													
										-			
-	~~~~												
_													
-													
	~~												
_													
											5	್ಷ ಈ	
												5 2 0	
-		 -								<u>.</u>	70	= =	
-								_			<u> </u>		
ecti	ve date if a	ther than	the date of	filing						(ont	lono)	当 (1)	. []
te:	lve date, if o ective date is list If the date insome ont's effective	serted in this	s block does	not me	et the ap	olicable	ate of fili	ng or mor y filing i	e than 90 requiren	days aftenents, th	r filing) is date x	illinot d	605.020 Blisted 6
rec he	ord specifi 90th day a	es a delay after the r	yed effecti ecord is fi	ive da iled.	ite, but	not a	n effec	tive tin	ne, at	12:01	a.m. o	n the e	arlier (
ed _	DECEMBER	. 21	1.1	<u>1</u> .	2015								
	&	2 1/	TIW	<i>Y</i>									_
		•	Signature	of a mo	ember or	authoriza	d r epre se	ntative of	a memb	c t			
	0.570	SCARPA	ATTONITO										

Page 3 of 3

Filing Fee: \$25.00