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COVER LETTER

Divis	sion of Cor	porations					
SUBJECT:	S & B Glob	al Enterprises, LLC					
SOBJECT:	Name of Limited Liability Company						
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please return a	all correspo	ndence concerning this matter	to the following:				
		SEAN SENIOR					
			Name of Person				
			Firm/Company				
		Address					
		Jaacksonville, FL 32246					
			City/State and Zip Code				
		tsgloablent@gmail.com E-mail address: (to be used for future annual report noti	fication)			
For further inf	ormation co	oncerning this matter, please ca					
Scan D. Senio	PΓ		904 755-1580				
	Name of	Person	Area Code Daytim	e Telephone Number			
Enclosed is a c	theck for the	e following amount:					
■ \$25.00 Fil	ing 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)			
	MAILI	NG ADDRESS:	STREET/COURI	ER ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Registration Section

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S & B GLOBAL ENTERPRISES, 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 $\frac{12/14/2}{2015}$ and assigned Florida document number L15000207061 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." 3097 BRETTUNGAR DR Enter new principal offices address, if applicable: JACKSONVILLE, FL 32246 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: SEAN SENIOR Name of New Registered Agent: 3097 BRETTUNGAR DR New Registered Office Address: Enter Florida street address **JACKSONVILLE**

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.

City

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	KEENAN MCCARDELL	3097 BREITUNGAR DR	
		JACKSONVILLE, FL 32246	■ Remove
			🗆 Change
MGR	NICOLE MCCARDELL	3097 BRETTUNGAR DR	
		JACKSONVILLE, FL 32246	■ Remove
			Change
MGR	TRAVIS TAYLOR	3097 BRETTUNGAR DR	
		JACKSONVILLE. FL 32246	■ Remove
			Change
MBR	Herbert Bartley	3097 Brethungar Dr Jackschille, FL 32246	g≭ Add
		Jacksmille, FL 32246	Remove
			Change
			🗆 Add
			□ Remove
			Change
			Remove
			☐ Change

D. If am	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	,	
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		18	VISIA HOBS
		18 JUN 14	227- 227- 327-
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			AFION
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E. Effec	date, if other than the date of filing:(optional)		
(If an ei <u>Note:</u>	ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date w's effective date on the Department of State's records.		
If the re (b) The	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. or Oth day after the record is filed.	n the earlie	er of:
Dated	NE 7 2018		
	Signature of a member or authorized representative of a member		
	SEAN D. SENIOR		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00