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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporation | | | • |
|--|--|---|--|
| SUBJECT:SC | reen Bob Name of Limit | Screen JLC led Liability Company | |
| The enclosed Articles of Am | endment and fee(s) are subn | nitted for filing. | |
| Please return all corresponde | ence concerning this matter t | o the following: | |
| | Rob | Name of Person | |
| | Scre | en Bob Screen Firm/Company | , LLC |
| | |) 25th Terrac | |
| | Cape Co | ral, FL. 339 City/State and Zip Code | 14 |
| - | 5Creenbok E-mail address: (1 | Screen @ yahoo o be used for future annual report noti | n. Com fication) |
| For further information cond | erning this matter, please ca | II: · | |
| Robert Name of Pe | Lantz | at (239) 645 Area Code Daytim | - 1450 e Telephone Number |
| Enclosed is a check for the f | ollowing 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 ADDRESS:

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

| Screen Bol (Name of the Limited Liability Compar (A Florida Limited L | s Screen, LLC. Ty as it now appears on our records.) Tability Company) | |
|--|--|------------------|
| The Articles of Organization for this Limited Liability Company Florida document number <u>116000</u> 39376 | were filed on | الے and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabi | lity company here: NO | |
| The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | ity Company," the designation "LLC" or the ab | |
| | | 33914 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | Cape Coral Fo | 32914 |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address: | fice address on our records, enter | |
| | , Florida | 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 **Title** <u>Name</u> **Address** Type of Action Joseph Lantz 927 S.W. 25th Terrace XAdd Cape Coral, FL. 33914 □ Remove □ Change ☐ Remove ☐ Change □ Add Remove ے Change 🗖 _□ Add ⋽

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| | te, if other than | e must be specific a is block does not | and cannot be prior t meet the applic | able statutory filio | whore than 90 da | ays after filing. |) Pursuant to 605.02 |
| an effective of the | date is listed, the date date inserted in the effective date on the | he Department of | i State 8 records. | • | | | |
| an effective of the ocument's ocumen | late is listed, the date date inserted in th | ayed effective | e date, but no | | time, at 1 | 2:01 a.m. | on the earlier |

Page 3 of 3

Filing Fee: \$25.00