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COVER LETTER

	gistration Sect vision of Corp						
CHDIECT.	Sunbiz Resou	urces, LLC					
SUBJECT:		Name of Limite	ed Liability Company				
The enclosed	d Articles of A	mendment and fee(s) are subm	itted for filing.				
Please return	all correspond	dence concerning this matter to	the following:				
		Christina Horton					
Name of Person							
		Wyoming Corporate Service	es, Inc.				
			Firm/Company				
	1712 Pioneer Avc. Suite 7000						
			 				
		Cheyenne, WY 82001					
			City/State and Zip Code				
		E-mail address: (to	be used for future annual report notifi	ication)			
For further is	nformation cor	ncerning this matter, please cal	1:				
Christina He	orton		800 990-0433				
	Name of 1	Person	Area Code Daytime	Telephone Number			
Enclosed is	a check for the	following amount:					
≅ \$25.00 F	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

Sunbiz Resources, 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 $\frac{7/13/2016}{}$ and assigned Florida document number $\frac{L16000136717}{}$ 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." 1712 Pioncer Ave. Enter new principal offices address, if applicable: Suite 206 (Principal office address MUST BE A STREET ADDRESS) Cheyenne, WY 82001 1712 Pioneer Ave. Enter new mailing address, if applicable: Suite 206 (Mailing address MAY BE A POST OFFICE BOX) Cheyenne, WY 82001 B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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
MGR	Graham Norris	1712 Pioneer Ave. Suite 206	■ Add
		Cheyenne, WY 82001	□ Remove
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rective date, if other than the done effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	be specific and cannot be prick does not meet the appl	or to date of filing o licable statutory fi	r more than 90 days a		
record specifies a delayed The 90th day after the reco		not an effectiv	e time, at 12:0	1 a.m. on th	e earlier of
November 9	, 2016	·			

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Filing Fee: \$25.00