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Certificates of Status
ng Officer:

Office Use Only



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COVER LETTER

TO: Registration So Division of Co			
IAM Supe	erstores, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Michael Stopperich		
		Name of Person	
	IAM Superstores, LLC		
		Firm/Company	
	7598 West Sand Lake Roa	d	
		Address	
	Orlando, FL 32819		
		City/State and Zip Code	
	ashleys@gotoiam.com	to be used for future annual report no	134Tonotions
For further information of	concerning this matter, please co	·	incatony
Ashley Stopperich		407 203.0500	
Name o	of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 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**

IAM Superstores, LLC					
(<u>Name of the Limite</u> (d Liability Compa A Florida Limited I	iny as it now appears on our Liability Company)	records.)		
The Articles of Organization for this Limited Lic	were filed on07.22.2016	, 	_ and assi	gned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
N/A					
The new name must be distinguishable and contain the we	rds "Limited Liabil	lity Company," the designation	r"LLC" or-the abbre	viation "L.L	C.``
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2040 N. Rio Grande Ave	e., Suite C		<u>\$</u>
		Orlando, FL 32804		<u>ء</u>	- 35 - 35 - 35 - 35 - 35 - 35 - 35 - 35
				<u>5</u> _	<u> </u>
Enter new mailing address, if applicable:		7598 West Sand Lake Ro	d.	6 PM	RY OF S
Mailing address MAY BE A POST OFFICE E	3 <i>OX</i>)	Orlando, FL 32819		<u>က</u>	_ÃÃ
Staning dady 23, PATT DE 717 (607 VI 1102 1601 V				8	NO.
3. If amending the registered agent and/o egistered agent and/or the new registered off Name of New Registered Agent:	•••		ecords, <u>enter th</u>	e name o	of the
	7598 West San	d Laka Rd			
New Registered Office Address:	- COO WEST SAIL	Enter Florida street	address		
	Orlando		Florida <u></u>	9	
		City	r ioriua	Zip Code	

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>	Name	Address	Type of Action
			☐ Remove
			□ Change
			Add
		·	□ Remove
			Change
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Note: 1	re date, if other than the date of filing: August 1, 2018 (optional) etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not not's effective date on the Department of State's records.	nt to 605 t be liste	i,0201 ed as
dvottille		e earlie	ar A
f the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.		÷1 O

Page 3 of 3

Filing Fee: \$25.00