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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

E-FORMS PREMIUM LLC	
Please Debit 120000000257 For: 25	
Thank you Seth Neeley	
Str.	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Рһого Сору
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ .	Officer Search
	Fictitious Search
Signature	Ficitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH 05/16	UCC 1 or 3 File
Name Date Time	— UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

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' TO:

Registration Section

Tallahassee, FL 32314

Division of Corp	porations			
	S PREMIUM LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	MONICA BAQUERIZO			
		Name of Person		
	SOFT LANDING US, LLC			
	Firm/Company			
	255 Alhambra Circle STI	E 500		
		Address	 	
	CORAL GABLES, FL 33	134		
		City/State and Zip Code	 	
	info@usasoftlanding.com			
	E-mail address: (to be used for future annual report no	tification)	
For further information co	oncerning this matter, please co	all:		
MONICA BAQUERIZO		346 4812560		
Name of Person		at () Area Code Daytir	ne Telephone Number	
	6.11. ·			
Enclosed is a check for the	c following 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:		Street Address:	.•	
Registration Section Division of Corporations		-	Registration Section	
P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

E-FORMS PREMIUM LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

	were filed on 09/27/2016	and assigned
Florida document number L16000180466		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
FORM GENIUS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	255 Alhambra Circle	<u>.</u>
(Principal office address MUST BE A STREET ADDRESS)	suite 500	
	coral gables FL 33134	
Enter new mailing address, if applicable:	10810 KATYFREEWAY	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 105	
<u> </u>	HOUSTON TX 77043	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the r	name of the new registered
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address , Florida City	Zip Code
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	, Florida	Zip Code

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>	<u>Address</u>	Type of Action
AR	SOFT LANDING US, LLC	10810 KATYFREEWAY, HOUSTON TX	■ Add
		77043	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□Add
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			Change
.			□Add
		-	□Remove
			[]Change

., .	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other than the fan effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the L	e date of filing:	5.0207 (; ted as th
record specifies a delayed effecti d is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	er the
Dated MAY 16	2023	
·	Signature of a member or authorized representative of a member	
MONICA BAQUE	RIZO	
	Typed or printed name of signee	

COVER LETTER

· TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

E-FORM SUBJECT:	S PREMIUM LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	MONICA BAQUERIZO				
Name of Person					
SOFT LANDING US, LLC					
Firm/Company					
	255 Alhambra Circle STE 500				
	Address				
	CORAL GABLES, FL 33134				
		City/State and Zip Code			
	info@usasoftlanding.com				
	E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
MONICA BAQUERIZO)	346 4812560 at ()			
Name of Person		Area Code Daytim	ne Telephone Number		
Enclosed is a check for the	ne following 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 Addres Registration S		Street Address: Registration Se	ction		
Division of Corporations		Division of Corporations			
P.O. Box 632	.7	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303