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COVER LETTER

	Registration Se Division of Cor			· ·				
eun ira	SP Yard Ul.	.c						
SUBJEC	· ! ·	Name of Lim	ited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all correspo	ndence concerning this matter	to the following:					
		Jeffrey C Steinert						
			Name of Person					
		Pepple Cantu Schmidt PLLC						
			Firm/Company					
		801 2nd Avenue, Suite 700	0					
			Address					
		Seattle, WA 98104						
		City/State and Zip Code						
	JSTEINERT@PCSLEGAL.COM							
		E-mail address: (to be used for future annual report notif	ication)				
For furth	er information co	oncerning this matter, please co	all:					
Jeffrey (C Steinert		206 625-9984					
	Name o	f Person		Telephone Number				
Enclosed	l is a check for th	ne following amount:						
\$25.6	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

SP Yard LLC	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)
he Articles of Organization for this Limited Liability Company	were filed on October 10, 2016 and assigned
lorida document number 1.16000187575	
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liabi	lity company here:
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "L.L.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	15 (10) A2
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B. If amending the registered agent and/or registered off egistered agent and/or the new registered office address here Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street address
	, Florida
	City 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	SP Yard Manager LLC	5403 W Gray Street	
	-	Tampa, FL 33609	≅ Remove
			Change
MGR	J. David Page	5403 W Gray Street	■ Add
		Tampa. FL 33609	□ Remove
			Change
			Add
			☐ Remove
			Change
			□ Aðd
			Remove
			Change
		 	□ Remove
			Change
			Add
			□ Remove
			Change

than the date of filing:	.0207 ed as
delayed effective date, but not an effective time, at 12:01 a.m. on the earlie the record is filed.	er of
2019	
the record is filed.	ırlie

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00