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MAY 29 2019 S. YOUNG

## COVER LETTER

TO:	Registration Sec Division of Corp			<b>.</b> - 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1 − 1	e		
CIII) II	127 PP .	Superman	Q	emodeling lity Company	LIC		
SUBJI	.cr:	Name of Lim	ited Liabi	lity Company			
The en	closed Articles of A	Amendment and fee(s) are sub-	mitted to	or filing.			
Please	return all correspoi	idence concerning this matter	to the 10	llowing:			
		Chr	isti	an Davis			
		•	N.	ame of Person			
		<u>&amp;u</u>	Per	an Davis ame of Person Nan Rema	deling uc		
		5120	CORR	Address			
		3130 West Christiana E-mail address: (1	Pa.	in Boau t	L 33411		
		<u></u>	City/S	ate and Zip Code			
		E-mail address: (1	Su v	De (Man revolt report r	no deling - a	on	
For fu	ther information co	oncerning this matter, please ca					
	Christic	an Davis	ä	Area Code Day	3532		
	Name of			Area Code Day	time Telephone Number		
Enclos	ed is a check for the	e following amount:					
	5.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	C	5.00 Filing Fee & ertified Copy dditional copy is enclosed)	Certified (	of Status &	
	Registra Division	NG ADDRESS: ttion Section t of Corporations		Registration Sec Division of Cor	porations		
P.O. Box 6327 Tallahassee, FL 32314				Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Supermo		ling ul		<u></u>
(Name of the Limit	ed Liability Company as it ac (A Florida Limited Liability C	<ul> <li><u>wappears on our records</u></li> <li>smpany)</li> </ul>	<u>~</u> )	
The Articles of Organization for this Limited Li Florida document number	ability Company were file	ed on <u>15, 25</u>	and assi	ened
This amendment is submitted to amend the follo	owing:			 유
A. If amending name, enter the new name of	the limited liability com	pany here:	; 3.•	<u></u>
The new name must be distinguishable and contain the w	ords "Limited Liability Compa	ny," the designation "LLC"	or the abbreviation "L.L.	.C."
Enter new principal offices address, if applic	able:			<del></del>
(Principal office address MUST BE A STREE	<u>T ADDRESS)</u>			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE of the second secon	or registered office add	· · · · · · · · · · · · · · · · · · ·	enter the name o	
Name of New Registered Agent:	<u>Christian</u>	pavi	<del>.</del>	<del></del> , ,
New Registered Office Address:	3130 Fden (	<i>*</i>	( wodal	addres
	jest laim	Enter Florida street address BRULL_, Flo	7 - ()	<del>_</del> _
New Registered Agent's Signature, if changing F			r	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registeing filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this company has been notified in writing of this company has been notified in writing of this continuous tables.	er and complete perform stered agent as provided egistered office address	ance of my duties, an for in Chapter 605, t	d Lam familiar with S.S. Or, if this docum	and nent is

Page 1 of 3

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 Type of Action Address Name Title Ohristian Slavis □ Add ☐ Remove □ Change Mer Anna Dis \_□ ∧dd □ Remove ☐ Change □ Add □ Remove ☐ Change \_□ ∧dd □ Remove \_□ Change  $\square$   $\land$ dd □ Remove ☐ Change \_□ Add ☐ Remove ☐ Change

If amending any other information, enter change(s	here: (Attach additional sheets, if necessary.)
Note: If the date inserted in this block does not meet the	(optional)  be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State's re	ecords.
ne record specifies a delayed effective date, b The 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the earlier of:
Dated popul 29 th 20 Churches	019
Signature of a member of	or authorized representative of a member
C Wris-	tian Davis or printed name of signee

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Filing Fee: \$25.00