## 

| (Reques                       | itor's Name)     |               |
|-------------------------------|------------------|---------------|
| (Addres                       | s)               |               |
| (Addres                       | s)               |               |
| (City/Sta                     | ate/Zip/Phone #) |               |
| PICK-UP                       | WAIT             | MAIL          |
| (Busine                       | ss Entity Name)  |               |
|                               |                  |               |
| (Docum                        | ent Number)      | <del></del> - |
| Certified Copies              | Certificates of  | Status        |
| Special Instructions to Filin | g Officer:       |               |
|                               |                  |               |
|                               |                  |               |
|                               |                  |               |
|                               |                  |               |





06/07/18--01019--006 \*\*30.00



## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |  |   |  |
|--|--|---|--|
|  | ERPRISES, LLC                                |   |  |
| SUBJECT:                               | Name of Limi                                 | ted 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:   |  |
|  | KENNETH B. COSTELLO                          | D. ESQUIRE  |  |
|  |  | Name of Person  |  |
|  | BOYETTE, CUMMINS &                           | NAILOS, PLLC  |  |
| •                                      |  | Firm/Company  |  |
|  | 1635 E. HIGHWAY 50. SUITE 300 Address        |   |  |
|  |  |   |  |
|  | CLERMONT, FL 34711                           |   |  |
|  | <u> </u>                                     | City/State and Zip Code   |  |
|  | AGUERNSEY@BCNLAW                             | FIRM.COM<br>to be used for future annual report notifi              | cution)  |
|  |  |   | cuttony  |
| For further information (              | concerning this matter, please ca            |   |  |
| AMY GUERNSEY                           |  | at ()<br>Area Code Daytime  |  |
| Name o                                 | of Person                                    | Area Code Daytime   | Telephone Number   |
| Enclosed is a check for t              | he 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) |
|  | ING ADDRESS:                                 | STREET/COURIE   |  |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SAMI ENTERPRISES, LLC  |   |                              |
|--|---|------------------------------|
| (Name of the Limited Liabi<br>(A Florid  | llty Company as it now appears on our records.<br>da Limited Liability Company) | _)                           |
| The Articles of Organization for this Limited Liability Florida document number 1.1700008047           | Company were filed on 01/10/2017  | and assigned                 |
| This amendment is submitted to amend the following:  |   |                              |
| A. If amending name, enter the new name of the lin   | nited liability company here:   | · 😞                          |
| The new name must be distinguishable and contain the words "Li   | mited Liability Company," the designation "LLC"                                 | or the abbreviation "LFL.C." |
| Enter new principal offices address, if applicable:  |   | <u> </u>                     |
| (Principal office address MUST BE A STREET ADD   | DRESS)  |                              |
| Enter new mailing address, if applicable:  |   | 149                          |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |                              |
| B. If amending the registered agent and/or reg<br>registered agent and/or the new registered office ad |   | , enter the name of the n    |
| Name of New Registered Agent:  |   |                              |
| New Registered Office Address:   | Enter Florida street address  |                              |
|  | , Flo   | orida                        |
| <del></del>  | 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>          | Address               | Type of Action  |
|--------------|----------------------|-----------------------|-----------------|
| MGR          | MIGUEL PEREZ MARANTE | 488 W. HIGHBANKS ROAD |                 |
|              |                      | DEBARY, FL 32413      | <b>■</b> Remove |
|              |                      |                       | Change          |
|              |                      |                       |                 |
|              |                      | <del></del>           | ☐ Remove        |
|              |                      |                       | ☐ Change        |
|              |                      |                       | D Add           |
|              |                      |                       | ☐ Remove        |
|              |                      |                       | Change          |
|              |                      |                       | D Add           |
|              |                      |                       | □ Remove        |
|              |                      |                       | Change          |
|              |                      | <u></u>               |                 |
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|              |                      |                       | ☐ Change        |
|              |                      | <u> </u>              | D Add           |
|              |                      |                       | Remove          |
|              |                      |                       | □ Change        |

|  |  | r information, enter chan  | ge(s) here: (Attach ad                | ditional sheets, if neces    | ssary.)                          |
|--|--|--|---------------------------------------|------------------------------|----------------------------------|
| Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filled.   | , <del></del>  |  |                                       | <del> </del>                 |                                  |
| Effective date, if other than the date of filing:    15/01/2018  |  |  |                                       | <del></del>                  |                                  |
| Effective date, if other than the date of filing:    15/01/2018  |  | <del></del>  |                                       |                              |                                  |
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| Effective date, if other than the date of filing: 05/01/2018 (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed.                        |  |  |                                       |                              |                                  |
| Effective date, if other than the date of filing:    Os/01/2018   Optional    If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02   Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.    Dated  |  |  | · · · · · · · · · · · · · · · · · · · |                              | <del></del>                      |
| Effective date, if other than the date of filing:  O5/01/2018  (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed.  Dated  Dated  2018 |  |  |                                       |                              | <i>J</i>                         |
| Effective date, if other than the date of filing:  05/01/2018  (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed.  Dated  2018        | ·  |  |                                       |                              |                                  |
| Effective date, if other than the date of filing:    O5/01/2018  |  |  | 1<br>1                                |                              |                                  |
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| The 90th day after the record is filed.  Dated   | If an effective date is listed,  Note: If the date inserte | the date must be specific and cam<br>d in this block does not meet | the applicable statutory              | or more than 90 days after f | iling.) Pursuant to 605.0207 (3) |
| Dated  | he record specifies a<br>The 90th day afte                 | delayed effective date<br>the record is filed.                     | e, but not an effecti                 | ve time, at 12:01 a.         | .m. on the earlier of:           |
| Signature of a member or authorized representative of a member   | Dated  | ·) 1 1 1 1 2   | 018                                   | 2                            |                                  |
|  | <del>_</del>   | Signature of a men   | ber or authorized represent           | ative of a member            | <del></del>                      |
| MIGUEL PEREZ MARANTE   | MIGUEL PE  | REZ MARANTE  |                                       |                              |                                  |

Page 3 of 3

Filing Fee: \$25.00