

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000196383 3)))



H170001963833ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : 120070000160

Phone : (800)494-3124

Fax Number : (305)675-2811 annual report mailings. Enter only one email address please.**

Email	Address:
-------	----------

ţ

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOTT'S CUSTOM WORKS LLC

Certificate of Status		0
Certified Copy		0
Page Count		04
Estimated Charge	7	\$25.00

O SIMINONS

JUL 28 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H17000196383 3

LOTTS	CUSTOM WORKS LLC	2	
(Name of the Limited Liability (A Florida)	Company as it now apper Limited Liability Company)	nts on our records.)	
The Articles of Organization for this Limited Liability Co Florida document number	ompany were filed on _	JULY 24, 2017	and assigned
This amendment is submitted to amend the following:	Seria		
A. If amending name, enter the new name of the limit			
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or regist registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	ess here:	on our records, <u>ente</u> lorida sirvei address	T JUL 27 AM IR new er the name of Management of the name of the new er the name of the new er the name of the new er the name of the name
		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:	
· -	H17000196383 3

MGR = M $AMBR = A$	lanager athorized Member	• • •	
Title	<u>Name</u>	Address	Type of Action
			☐ Add
			□ Remove
			☐ Change
			∩ ∧dd
			□ Remove
			□ Change
			Change 17 Add 17 Add 18 Change 18 Add 19 Change 19 Change 19 Change 19 Change 10 Change
			So Remove
			DAdd 2
			□ Remove
			Change
			D Add
			□ Remove
			☐ Change
			D ∧dd
			□ Кстоус
			Charan

				н	17000196	383_3
	_					
			<u> </u>			
						
		<u> </u>				
			•			
•			,			
						
				. =		
		· · · · · · · · · · · · · · · · · · ·				
				-	9	
						7
					DIVISION OF CORT-O ATTIONS	JUL 27
					- G	27
		<u> </u>				
<u></u>	<u></u> -				<u> </u>	WH 15:
					2	بر 2
		···	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		-3
				, ,		
fective date, if other than the effective date is listed, the date is	e date of filing:	ot be prior to date	of filing or more t	(optio han 90 days after f	nai) iling.) Persuant	to 605.02
ote: If the date inserted in this neument's effective date on the	olock does not meet t	he applicable s	tatutory filing re	quirements, this	date will not b	e listed a
comence a crieditive date on the	separtment or otale s	. 1000103.				
record specifies a delay	art effective date	hut not an	effective time	ב 10י1 a e	m on the i	earlier :
The 90th day after the re	cord is filed.	but not un		., 12.01 0.	on the v	3011701
ited	, <u>-</u> _	2017				
	×	Ί,	11	\mathcal{O}		
		at az miharinad	representative of a		,,,_	_
	Signature of a meach	- OI 40010012 0 01	representative of a	memori		
	•					

Page 3 of 3

Filing Fee: \$25.00