## 05/31/2018 2:28FF 643 6FF 42.89 6 SUPERITY 6

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((IH18000165878 3)))



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

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please \*\*\*

Email	I ACIC	ress	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

STPR LLC

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

**B FIGUEROA** 

## ARTICLES OF AMENDMENT TÖ ARTICLES OF ORGAPIZATION OF

H18000165878 3

	STPR LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears of imited Liability Company)	our records.)	<del></del>
The Articles of Organization for this Limited Liability Cor Florida document number	mpany were filed onM	ARCH 01, 2018	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here	:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the design	mation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>		
(Principal office address MUST BE A STREET ADDRE	<u></u>		22
	71 AN SE W.		AV
Enter new mailing address, if applicable:	<u>-</u>		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addresses	ered office address on c ess here:	our records, <u>ente</u>	r the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter Florid	n street oddress	
		, Florida	
	Ciry		Zip Code
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplese performance of ment as provided for in Ch d office address, I hereby	apter 605, F.S. C	r, if this document is
	s,		
	If Changing Registered Ages	nt, <u>Signature of New</u>	Registered Agent

Page 1 of 3

H18000165878 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H18000165878 3

MGR ≃	Мападег	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	SUSAN E PLATT	_	1296 TUNG HILL DRIVE	
· ———			TALLAHASSEE, FL 32317	■ Remove
				Change
MGR	SEAN T RADY	<b>-</b>	1296 TUNG HILL DRIVE	■ Add
			TALLAHASSEE, FL 32317	Remove
			·	Change
		_		
				П Кеточо
				Change
		—,		
			;	Remove
				Cl Change
			3°	[] Add
				Remove
				Сhange
		_		Add
				🗆 Remove
				Change

		,	H18000165878 3
		ı	
		,	
·			
			<u> </u>
			63
			<b>5</b>
	· · · · · · · · · · · · · · · · · · ·		<u> </u>
	(	Table to	ORIO Z
		•	
		,	
		-	
			(= :#o-==1)
fective date, if other than the dat n effective date is listed, the date must be s	e of filing:	of filing or more than 90 da	(optional) ys after filing.) Pursuant to 60
ite: It the date inserted in this block (	0062 IIO! шёсі ше яррпеявы эк	atutory filing requirement	nts, this date will not be lis
cument's effective date on the Depart	ment of State's records.		
record specifies a delayed eff	fective date, but not an o	effective time, at 13	2:01 a.m. on the earl
The 90th day after the record	is illeu.		
MAY 31	2018		
ited		1	
	Som m	Thanks	
	nature of a member or authorized r	torecontalive of a member	
Sign	sathing of a member of annioused i	chica manage	

Page 3 of 3