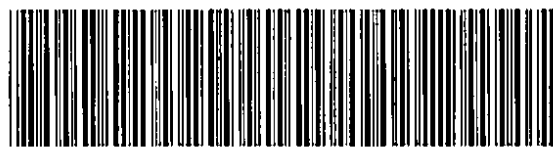


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DIVISION OF CORPORATIONS

N COOPER
JUN 29 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SIPATAP HOLDINGS FL. LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICK DISALVO

Name of Person

DISALVO & ASSOCIATES PLLC

Firm/Company

1760 N JOG ROAD STE 150

Address

WEST PALM BEACH FL 33411

City/State and Zip Code

PDISALVO@D-ACPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK DISALVO

561 659-1177
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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>	<u>Type of Action</u>
MGR	DEAN PATAPIS	7634 155TH PLACE NORTH	<input type="checkbox"/> Add
		PALM BCH GARDNS FL 33418	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CONSTANTINE PATAPIS	7634 155TH PLACE NORTH	<input checked="" type="checkbox"/> Add
		PALM BCH GARDNS FL 33418	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Multiple horizontal lines for amending information.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JUN 28 PM 3:01

E. Effective date, if other than the date of filing: _____ (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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JUNE 22 _____, 2018

Signature of a member or authorized representative of a member

CONSTANTINE PATAPIS

Typed or printed name of signee