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COVER LETTER

TO:				
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OTEST	BIJECT: SIMS MANAGEMENT SURVICES, LLC Name of Limited Liability Company c enclosed Articles of Amendment and feets) are submitted for filing. case return all correspondence concerning this matter to the following: Processing Department Name of Person Firm/Company \$605 Riggins Ct Ste 200 Address Reno, NV 89502 City/State and Zip Code dox/obincauthority.com E-mail address: (to be used for future annual report notification) if further information concerning this matter, please call: Occasing Department Name of Person 1 300 638-2320 Area Code Daytine Telephone Number closed is a check for the following amount. \$25.00 Filing Fee & Certificat Copy (additional cope is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS:			
		SIMS MANAGEMENT SERVICES, LLC Name of United Liability Company and Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: Processing Department Name of Person Firm/Company \$605 Riggins Ct Stc 200 Address Reno, NV 89502 City/Nate and Zip Code doxs/dimeanthority com Found address: (to be used for future annual report notification) information concerning this matter, please call: Department Name of Person \$00		
			Firm/Company	
		5605 Riggins Ct Ste 200		
			Address	· · · · · · · · · · · · · · · · · · ·
		Reno, NV 89502		
		dos stating authority gota	City/State and Zip Code	
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l or fur	rther information c	oncerning this matter, please of	ull:	
Proces	ssing Department			
•	Name o	t Person	Area Code Da	ytime Telephone Number
Laclos	ed is a check for th	ne following amount.		
■ \$2	5,00 Filing Fee	•	Certified Copy	Certificate of Status & Certified Copy
	Registr	ation Section	Registration Se	ection

P.O. Box 6327 Tallahassee, FL 32314 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Emited I	ny ny it now appears on our records.) jability Company)	
The Articles of Organization for this Limited Fiability Company	were filed on 05 04/18	and assigned
Florida document number 1.18000112334		
Florida document number 1.18000112334 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L1 C" or the abbreviation "L1 B Volume Company here: Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32808 USA Orlando, FL 32808 USA Orlando, FL 32808 USA		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	hty Company," the designation "LLC" or the abbrevia	ution "L.I. 78 Yes
	Orlando, FL 32808 USA	
Enter new mailing address if applicable	2905 Fastern Willow Avenue	PM 4:
	Orlando, FL 32808 USA	2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		name of the new
New Registered Office Address:	Enter Florida street address	
	, Florida	m Carlo

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

Title	<u>Name</u>	Address	Type of Action
MGR	Lathadus Sins	2905 Lastern Willow Avenue	🗖 Add
		Orlando, FL 32808 USA	□ Remove
			■ Change
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