3/15/2019

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email Address:____

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COVER LETTER

| TO: Registration Se Division of Cor | ction porations | | | |
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| | LDINGS, LLC | | | |
| SUBJECT: | Name of Lim | ited Liability Company | · · · · · · · · · · · · · · · · · · · | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspo | ndence concerning this matter | to the following: | | |
| | Cheyenne Moseley | | | |
| | and the second s | Name of Person | | |
| | Legálzoörn.com, Inc. | | | |
| | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 | Firm/Company | | • |
| | 101/N. Brand Blvd., 11/i | h Floor | | |
| | | Address | . , , , , , , , , , , , , , , , , , , , | • |
| | Glendale, CA.91203 | | | |
| | | City/State and Zip Code | | |
| | sasjholdings@outlook.co | un to be used for future annual report nou | fication) | |
| For further information of | oncerning this matter, please c | | | |
| Cheyenne Moseley | | 800 773-0888 e | | |
| Name of | f Person | at ()Area Code Daytina | e Telephone Number | · C |
| Enclosed is a check for th | ne following:amount: | | | |
| □ \$25.00 Filing Fee | S30.00 filling Fee & Certificate of Status | S55.00 Filing Fee.& Certified Copy (additional copy is enclosed) | Certified | te of Status & |
| | 100 100 100 100 100 100 100 100 100 100 | อย่ายได้เกาะเกาย | ED ANNDESS. | |

MAILING ADDRESS: Registration-Section Division of Corporations-P.O. Box 6327 Tallahassec, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations: Clifion Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SASJ HOLDINGS, LLC | | |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------|
| (Name of the Limited Liability Compar (A Florida Limited L | ay as it now appears on our records. ability Company) | · |
| The Articles of Organization for this Limited Liability Company | were filed on 01/29/2019 | and assigned |
| Florida document number L19000029657 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending-name, enter the new name of the limited liabi | lity company here: | 10000000000000000000000000000000000000 |
| The new name must be distinguishable and end with the words "Limited Liabi | lity Company," the designation "LLC | or the abbreviation "A.L.C." |
| Enter new principal offices address, if applicable: | | <u> </u> |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: | 2803 Gulf To Bay Blvd #162 | <u>~</u> |
| (Mailing address MAY BE A POST OFFICE BOX) | Clearwater FL 33759 | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | | enter the name of the new |
| Name of New Registered Agent: | , | |
| New Registered Office Address: | Enger Florida street address | ··. |
| | , Flor | rlda |
| | 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member **Type of Action** Title Address Name. □ Add □ Remove . □ Remove 3 ___ 🔲 Remove □ Add □ Remove

| | | | | | | |
|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------|---------------------------------|----------------------|-----|
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