L19000097122

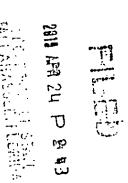
(Reque	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	tate/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nar	me)
(Docum	ment Number))
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	-

Office Use Only



200328301172

04/34/19--01015--014 ••25.00



MAY 0.7 2013 T. LEMIEUX

COVER LETTER

Division of Corporations SALES SHOPPERS LLC SUBJECT: 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: SANKAR RAMAIAH Name of Person SALES SHOPPERS LLC Firm/Company 1969 S ALAFAYA TRAIL #217 Address ORLANDO, FL 32828 City/State and Zip Code DECAF592019@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SANKAR RAMAIAH Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

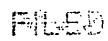
TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SALES SHOPPERS LLC

(Name of the Limited Liability Company as it now appears on our reports, 156 24 P 2 43

The Articles of Organization for this Limited Liability Compan	y were filed on 4/8/	/2019 (1) 1 x and assigned
Florida document number L19000097122		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company her	<u>re</u> :
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the de	signation "LLC" or the abbreviation "LLC."
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)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent: New Registered Office Address:	re:	
	Enter Florie	da street address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent	-	7.1p Code
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	 ree to act in this co e performance of r provided for in Cl	my duties, and I am familiar with and hapter 605, F.S. Or, if this document is

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

<u>Title</u>	Name	Address	Type of Action
AMBR	PRASAND SANKAR	1969 S ALAFAYA TRAIL #217 ORLANDO, Fl. 32828	B Add
			Remove
			Change
			
			Remove
			Change
			Add
			□ Remove
		☐ Change	
			□ Add
			☐ Remove
		☐ Change	
			
			□ Remove
			□ Change
			🗆 Remove
			Change

(Ifan e <u>Note</u>	May 1, 2019 ctive date, if other than the date of filing: (optional) ffective 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 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	d April 22
	Signature of a member or authorized representative of a member
	signature of a member of additionated representative of a member
	SANKAR RAMAIAH

Page 3 of 3

Filing Fee: \$25.00