L19000230463

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	<u> </u>
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1883 W. Royal Hunte Dr. Suite 200 Cedar City, Utah 84720 Phone 435-586-9366 Fax 435-586-9491 Andrea Emans, Paralegal andrea@kkoslawyers.com

December 16, 2020

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for SPRING VIRTUAL LLC. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Andrea Emans, Paralegal

Enclosure

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPRING VIRTUAL LLC

(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000230463</u>		and assigned
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 L.	iability Company," the designation "LLC" or the sh	abreviation "I I C"
Enter new principal offices address, if applicable:	C. T.	2020
(Principal office address MUST BE A STREET ADDRESS)		음 = = = = = = = = = = = = = = = = = = =
		(C) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:		PH 3
(Mailing address MAY BE A POST OFFICE BOX)		<u>ယ</u> ယ
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agen		Zip Code
I hereby accept the appointment as registered agent and age 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.	gree to act in this capacity. I further agre te performance of my duties, and I am fa	miliar with and

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>	<u>Name</u>	Address	Type of Action
AMBR	Reinaldo R. Reyes	5316 Bolero Circle	
		Delray Beach, FL 33484	□Add
MGR	Reinaldo R. Reyes	203 Franklin Club Drive UNIT 5201	□ Change
		Delray Beach, FL 33483	= Add
			□Remove
		: · · · · · · · · · · · · · · · · · · ·	□ Change
			Remove
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in ette	ive date, if other than the date of filing: [ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs If the date inserted in this block does not meet the applicable statutory filing or more than 90 days after filing.)	niant In 60\$ f
cume	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will rent's effective date on the Department of State's records.	not be listed
ecord is file	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	n day after i
ted _	December 17, 2020.	
	December 17, 2020. Reinaldo R Reyes	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00