

L20000057592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

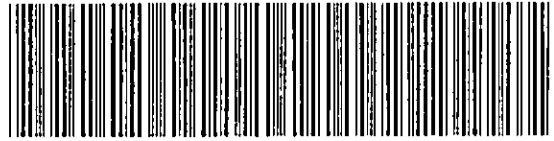
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700344260597

2020 MAY -8 PM 7:22

RECEIVED
2020 MAY -8 PM 12:34
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 5/8/2020

PRIORITY , Routine

OUR REF # (Order ID#) 825493

ORDER ENTITY

SUPER MARKETING PROS

PLEASE PERFORM THE FOLLOWING SERVICES:

SUPER MARKETING PROS (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

Email address for annual report reminders: jai@consolidatedpestcontrol.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Super Marketing Pros 2
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2320: -8 7:23

The Articles of Organization for this Limited Liability Company were filed on Feb 20, 2020 and assigned Florida document number L20000057592.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Super Marketing Pros LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3625 Century Bl Ste 1
Lakeland, FL 33811

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3625 Century Bl Ste 1
Lakeland FL 33811

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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 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>
AR	Wallace, Shelly K	37609 A Aradyn 37609 A Aradyn	☐ Add
		Zephyrhills, FL 33542	☒ Remove
			☐ Change
MGR	Wallace, Chad N	37609 A Aradyn	☒ Add
		Zephyrhills, FL 33542	☐ Remove
			☐ Change
MGR	Buttram, Jai A	Five Acre Rd	☒ Add
		Plant City, FL 33565	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

Add tax ID- 84-4932687

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 5-7-2020,

Signature of a member or authorized representative of a member

Jai A Buttram

Typed or printed name of signee

Filing Fee: \$25.00