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(Re	questor's Name)
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

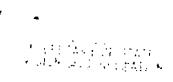
TO:

Registration Section

Div	ision of Cor	porations		
orun mare			•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
		SCOTT J. WEISELBERG		
			Name of Person	
		KOPELOWTIZ OSTROW	FERGUSON WEISELBERG O	GLBERT
		PRO PARTNERS. LLC Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: SCOTT J. WEISELBERG Name of Person KOPELOWTIZ OSTROW FERGUSON WEISELBERG GILBERT Firm/Company I WEST LAS OLAS BLVD, SUITE 500 Address FORT LAUDERDALE, Fl. 33301 City/State and Zip Code WEISELBERG@KOLAWYERS.COM E-mail address: (to be used for future annual report notification) ion concerning this matter, please call: BERG at (Area Code Daytime Telephone Number for the following amount: ce S30.00 Filing Fee & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) Merss: ion Section Street Address: Registration Section Division of Corporations 6327 The Centre of Tallahassee		
		1 WEST LAS OLAS BLV	D, SUITE 500	
			Address	
KOPELOWTIZ OSTROW FERGUSON WEISELBERG GILBERT Firm/Company 1 WEST LAS OLAS BLVD, SUITE 500 Address FORT LAUDERDALE, FI. 33301 City/State and Zip Code WEISELBERG@KOLAWYERS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:				
	sed Articles of Amendment and fee(s) are submitted for filing, urn all correspondence concerning this matter to the following: SCOTT J. WEISELBERG			
		WEISELBERG@KOLAW	YERS.COM	
		E-mail address: (to be used for future annual report no	otification)
For further is	nformation c	oncerning this matter, please co	all:	
SCOTT J. W	/EISELBER	G		
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 B	Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
		•		Section
	=			
Tal	llahassee, I	FL 32314	2415 N. Moni	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 MAY -3 PH 5: 22

SANIPRO PARTNERS, LLC

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

The Articles of Organization for this Limited Liability Co		and assigned
Florida document number 1.20000152018		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRE	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the	name of the new registered
Name of New Registered Agent:	 	
New Registered Office Address:	Enter Florida street address	
	, Florid	a
	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 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

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<u>Title</u>	<u>Name</u>	Address 21 HAY -3	PM 5: 22 Type of Action
AMBR	STEVEN IVANS	556 BOULDER CREEK AVE.	□Add
		FAIRHOPE, FL 36532	■ Remove
		556 BOULDER CREEK AVE.	□Change
AMBR	STEVEN IVANS	FAIRHOPE, AL	■Add
			□ Remove
			Change
			□ Remove
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ective date, if other than the effective date is listed, the date mu	st be specific and cannot be prio	r to date of filing or mo	re than 90 days aft	er filing.) Pu	rsuant to 605.020
e: If the date inserted in this b ument's effective date on the D			requirements, th	iis date wil	l not be listed a
unien s'eneenve date on me b	epartment of State's records				
cord specifies a delayed effective filed.	e date, but not an effective t	ime, at 12:01 a.m. o	n the earlier of:	(b) The 90	oth day after the
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APRIL 21	2021				
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	Signature of a member or auth	Avrosité	ken.		
	Signature of a member of auth	iorized representative (ot a member		