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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Photo Copy				Annual Report / Reinstatement
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Certificate of Status				Photo Copy
Certificate of Fictitious Name				Certificate of Good Standing
Corp Record Search				Certificate of Status
Officer Search				Certificate of Fictitious Name
Fictitious Search				Corp Record Search
Fictitious Owner Search			İ	Officer Search
Vehicle Search				Fictitious Search
Vehicle Search	Signature			Fictitious Owner Search
Courier Courier_	3			Vehicle Search
Name Date Time UCC 11 Search				Driving Record
Name Date Time UCC 11 Retrieval	Requested by: SET	Н		UCC 1 or 3 File
Walk-In Will Pick Up Courier	Name	Date	Time	UCC 11 Search
	- WILLS	Date	Time	UCC 11 Retrieval
		19		Courier

COVER LETTER

TO:	Registration S Division of Co		•	
		5 -2-1-1		
SUBJE	CT:	SURREALITY.	LC	
		Name of Limi	ted Liability Company	
The enc	losed Articles o	f Amendment and fee(s) are subr	nitted for filing.	
Please r	eturn all corresp	ondence concerning this matter t	to the following:	
		PAIGE	E SPORN Name of Person	
		Sui	REALITY, LLC Firm/Company	
		233	A57 Box A Club Colony CIR	
		Boc	A RAton, Florida 33433 City/State and Zip Code	
		Paige 6	Paige Sproperties, com o be used future annual report notification)	
For furt	her information	concerning this matter, please ca		
	PAIGE Name	SPORN	at (SEL) 997-4818 Area Code Daytime Telephone Number	
		V. 1 010501	Aca code Sayane receptione (Author)	
Enclose	d is a check for	the following amount:		
2 5	.00 Filing Fcc	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified (of Status &
	Mailing Addre	Section	Street Address: Registration Section	
	DIVISION OF	Corporations	Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SURREALITY, L	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>Laloooa3131</u> .		∂ ∑	d assigno	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	ne abbreviatio	n "L.L.C.	**
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 office a agent and/or the new registered office address here:	ddress on our records, <u>enter the n</u>	ame of the	new res	<u>zistered</u>
Name of New Registered Agent:				- -
New Registered Office Address:				<u>.</u>
	Enter Florida street address Florida		9: 22	-
	City	Zip Co	ode	

w Registered Agent's Signature, if changing Registered Agent:

ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is g filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	PAIGE SPORN	BOCA RATON, ELORIDA 33433	XAdd
		BOCK MATON / ECONIDA 30133	□Remove
			🗆 Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			[]Change
			_ 🗆 Add
			_ 🗆 Remove
			_ 🗆 Change
			_ 🗀 Add
			_ 🗆 Remove
			_ [] Change
			_□Add
			□Remove
			□Change

amending :	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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ective date	, if other than the date of filing: (optional) e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
ri the da	the inserted in this prock does not incer the applicable statutory liting requirements, this date will not be listed a
ument's effe	ective date on the Department of State's records.
cord specific	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s filed.	
ed	02/47,2021
	M
	Signature of a member or authorized representative of a member
	- Comment of a member of a member
	PAIGE SPORN
	Typed or printed name of signee

Filing Fee: \$25.00