

L21600043905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

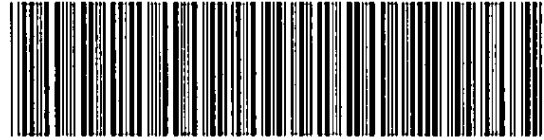
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/29/21--01035--024 **25.00

2021 APR 29 PM 3:13
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OFFICE OF THE
CLERK OF THE
COURT

Handwritten signature/initials: JS 3/22/21

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SCT2 LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan Tray

Name of Person

The Keyes Company

Firm/Company

335 Sherwood Forest Dr

Address

Delray Beach, FL 33445

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Tray	561	254 0549
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

11/15/2011 12:20:10 PM

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

SCT2 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 Company were filed on 01/22/2021 and assigned
Florida document number L21000043905.

This amendment is submitted to amend the following:

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

Susan Tray LLC

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

Enter new principal offices address, if applicable:

335 Sherwood Forest Dr

(Principal office address MUST BE A STREET ADDRESS)

Delray Beach FL 33445

Enter new mailing address, if applicable:

335 Sherwood Forest Dr

(Mailing address MAY BE A POST OFFICE BOX)

Delray Beach FL 33445

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:

Susan Tray

New Registered Office Address:

335 Sherwood Forest

Enter Florida street address

Delray Beach

Florida 33445

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

FILED
2021 MAR 29 PM 3:10
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH, FLORIDA

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

ALL INFORMATION CONTAINED
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DATE 03-05-2010 BY 60322 UCBAW

2011 MAR 29 PM 3:13


03-29-2011

[illegible]

(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)

RECEIVED
JAN 20 1968
FBI - NEW YORK

Dated 03/23, 2021


Signature of a member or authorized representative

Susan Tray

Typed or printed name of signee

Filing Fee: \$25.00