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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SQ INTERNATIONAL, LLC

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T LEMIEUX MJV 28 2022

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF -

SQ International, LLC				
(Name of the Limited L (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)			
The Articles of Organization for this Limited Liabil Florida document number L2100070909	lity Company were filed on 02/10/21	and	d assig	ned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company here:			
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the a	bbreviatio	n "L.L.C	
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	(DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	-مر			
	<u> </u>	<u> </u>	2022	· · · ·
B. If amending the registered agent and/or regis agent and/or the new registered office address h	stered office address on our records, <u>enter the nan</u> <u>ere</u> :	ne of the		registered
Name of New Registered Agent:	12134111	<u>-</u>	PH 4:	
New Registered Office Address:	Enter Florida street address	<u> </u>	20	
	, Florida			
-	City	Zip C	ode	

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>	Address	Type of Action
AMBR	Susan Q Wood	7901 4th St N STE 300	XlAdd
		St. Petersburg, FL 33702	□Remove
			□Change
****	and the second of the second o		DAdd
			□Remove
			□ Change
			□Add
			□Remove
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Effective date, if other than the da If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prio k does not meet the appli	cable statutory filing requ	(optional) in 90 days after filing.) Pursua iirements, this date will no	nt to 605.0207 (t be listed as t
e record specifies a delayed effective d rd is filed.	ate, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th (lay after the
Dated November 22	2022	·		

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