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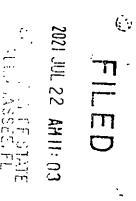
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COVER LETTER

TO: Registration Section Division of Corporations	REC	•
9	7 T. C.	.D
SUBJECT: SUPERNOVA FX LLC Name of Limited Liability Company	2821 JUL 22 PH	
Same of Emulea Madinity Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.	TALLAI	÷
Please return all correspondence concerning this matter to the following:		
RUDY CIMO CESAIRE Name of Person		_
Firm/Company		_
SGO NE 110 TELR Address		_
Address		
MIAMI FL 3'31U1 City/State and Zip Cod Rudy C 215 (2) G MAIL. COM Email address: (to be used for future annual		_
For further information concerning this matter, please call:		
RUDYGING CESAIRE at (786) Name of Person Area Code	510-654@ Daytime Telephone Numb	er
Enclosed is a check for the following amount:		
☐ \$25.00 Filing Fee	Certific enclosed) Certifie	Filing Fee. cate of Status & cd Copy cal copy is enclosed)
Registration SectionRegistDivision of CorporationsDivisiP.O. Box 6327The CTallahassee, FL 323142415 Y	Address: tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	8 10

Note

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUDER WOYA FX LLC		
(Name of the Limited Liability Companial (A Florida Limited Liability Companial)	v as it now appears on our rability Company)	ecords.)
The Articles of Organization for this Limited Liability Company velocida document number <u>L 21000 211877</u> . This amendment is submitted to amend the following:	vere filed on <u>05 – 6 – 7</u>	and assigned
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		21
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office acagent and/or the new registered office address here: Name of New Registered Agent:	ldress on our records, g	enter the name of the new registered
New Registered Office Address:		
	Enter Florida strect	udress
	Cirv	, Florida
L. D. Carlotte and State of State of Decision of Assets	c, m	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete procept the obligations of my position as registered agent as propeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duti vovided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
were an experience		

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> </u>	Name	Address	Type of Action
MOR	RUDYGING CESAIRE	560 NE 110 TERR. MILLIM	F1 3316/ TAdd
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n effective date is listed, the date must be specific and cann	not be prior to date of	filing or more t	han 90 day	s after filing	g.) Pursuant to 605 - will not be list	5.0207 (3)(b) ed as the
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Filing Fee: \$25.00