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(R€	equestor's Name)	
(Ad	ldress)	
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PILLED 2022 APR II AM 7: 43 SECRETARY OF STATE

A. BUTLER
MAY 1 0 2022

COVER LETTER

Division of Corporations
SUBJECT: Super Pest Solutions LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Serra - Owner Name of Person Super Pest Solutions Firm/Company
11576 Sanderling Drive
Welling ton Fl. 33414 City/State and Zip Code 1 SUPER DEST SOLUTIONS @ GMail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Serra at 501 921-7450 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$555.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OI	7	Ellen
Super	- Pest	Solution	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Name of the Limite	d Liability Compan A Florida Limited Li	y as it now appears on ou ability Company)	ir records.) All 7:43
The Articles of Organization for this Limited Lia	ibility Company v	vere filed on Janu	SECRETARY OF STATE TALL AND 20ER and assigned
Florida document number LZZ00001	2749.		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liabil	ity company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabilit	y Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	(OX)		
B. If amending the registered agent and/or re agent and/or the new registered office address		ddress on our record	s, <u>enter the name of the new registered</u>
	101126	al Davis	
Name of New Registered Agent:	MICH	gel Serre	1-OWIER
New Registered Office Address:	115710	Sander l Enter Florida stre	ing Drive
	Wellir	ngton give	, Florida 33414 Zin 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

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>	Name	Address	Type of Action
AMBR	Michael Serra & Owner	11576 Sanderling Driv	<u>C</u> BAdd
nanagul	e owner	11576 Sanderling Driv Wellington Fl. 33414	□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗆 Add
			□Remove
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			□Change
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). If amending ar	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
an	I filed for Sunpiz on January 3,2022 line I marked that I am the Owner ad authorized member but when vent to the bank to open a new count for the business they told I am not marked as an authorize
Mes	mber / OWner.
	
	
(If an effective date Note: If the date	if other than the date of filing:
f the record specifie ecord is filed.	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
Dated(anuary 19, 2022.
9	Pachael Leve Signature of a member or authorized representative of a member
	Michael Serra Typed or printed name of signee

. . . .