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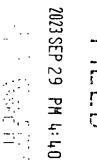
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(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Serge Solution Services 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:
hacey Cambbell Name of Person
Serge Solution Services LLC Firm/Company
1992 Lewis Turner Blyd Address
Fort Walton beach, F1 32547 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hocey Cambbell at 850 943 - 2976 Name of Person at 850 Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Scrae Solution	Services	LLC	
Scree Solution (Name of the Limited Liabil) (A Florid	ity Company as it now appears of a Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability C Florida document number <u>L 22 00 0 15 0 4</u>	Company were filed on 04		_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the him	ited liability company here	:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the design	gnation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:	<u>,</u>	` `	F I L
(Mailing address MAY BE A POST OFFICE BOX)		1) () () () () () () () () () () () () ()	_ m
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our reco	ords, enter the name	of the new registere
agent and/or the new registered office address nere.			
Name of New Registered Agent:			
New Registered Office Address:		·	
	Enter Florida	street address	
		Florida	
	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 Regis	tered Agent, S	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
MGR	Alexander I. Marshall	1992 Lewis Turner	_ B/dd
		Blyd, Fort Walton beach	<u>\ </u> □Remove
		Florida 32547	□Change
			□Add
			□Remove
			🗆 Change
·			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any	y other information, e	nter change(s) here:	(Attach additional sh	neets, if necessary.)	
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ivote. If the date i	other than the date of listed, the date must be speci nserted in this block does we date on the Departmen	filing:	date of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pur rements, this date will	suant to 605.0207 (3), not be listed as the
the record specifies a cord is filed.	delayed effective date, b	ut not an effective time	, at 12:01 a.m. on the e	artier of: (b) The 90	th day after the
Dated	···	,			
		Carbell e of a member or authoriz			
		Typed or printed n		nber	
		Typed or printed n	ame of signee		