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Special Instructions	to Filing Of	ficer.	
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COVER LETTER

TO: Registration Section Division of Corporations	1556 1556 1556 1556 1556 1556 1556 1556
SUBJECT: Summit SF Holdings LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for fitting.	
Please return all correspondence concerning this matter to the following:	
John Robinson Name of Person	
Firm/Comp my	
9354 Equus Circle	
Boynton Beach FL 33472 City/State and Z:p Code	
E-pail address: (To be used for future annual report notification)	
For further information concerning this matter, please call:	
Tohn Robinson at (561) 714 - 43\$1 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee & ☐	of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT

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ARTICLES OF ORGANIZATION	-
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Summit St Holdings LLC ==	П
(Name of the Limited Liability Company as it now appears on Aur records.)	
(A Florida Limited Liability Company)	بطسائين
The Articles of Organization for this Limited Liability Company were filed on	
Florida document number <u>L23000559372</u> .	
This amendment is submitted to amend the following:	
A. If amonding name autom the name and of the Paris 12 12 12 12	
A. If amending name, enter the new name of the limited liability company here:	
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:	
(Principal office address MUST BE A STREET ADDRESS)	
	_
	_
Enter new mailing address, if applicable:	
	_
(Mailing address MAY BE A POST OFFICE BOX)	
	_
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:	- IIC II
Name of New Registered Agent:	_
New Registered Office Address:	
TOT DEFINITION OF THE AUDIESS.	

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.

Cir

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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 = Auti	horized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	John Robinson	9354 Equis Circle	∠_ ⊠ Add
		9354 Equis Circle Bounton Beach FL	Remove
		33472	Change
AMBR	_Sydney Robinson	9354 Equis Circle	© ∦Add
		Boynton Beach FL	□ Remove
		33472	Change
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