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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number: I20070090160

Phone : (800) 494-3124

Fax Number : (305)675-2811

**Enter	the	email	address	for	this	busin	<b>8</b> 88	entity	to	be t	usad	for	futi
an	nual	repor	t mailin	gs.	Enter	only	one	email	add:	ress	ple	ase.	**

Email	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WM INVESTMENTS NEW USA LLC

Certificate of Status	0
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O SIMMONS JUN 2 9 2017

DIVERSION OF CORPORATIONS

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

State:	10135 HARTFORD MAROON ROAD
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FLORIDA 32827
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10135 HARTFORD MAROON ROAD ORLANDO, FLORIDA 32827
2. The Florida document number of this limited lia	bility company is: M1400009161
3. Jurisdiction of its organization:DELAV	VARE SO SO
4. Date authorized to do business in Florida:	DECEMBER 23, 2014 9 8
SECTION II (5-9 complete only the applicable of	changes)
New name of the limited liability company: (must	VARE  DECEMBER 23, 2014  changes)  t contain "Limited Liability Company, ""L.L.C.," or "LLC.5"
(If name oravailable, onter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "Linco	naging members adopting the alternate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	Planida
<del></del>	City Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	gistered Agent: nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with ered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited

l'itle/ Capacity	<u>Name</u>	Address	Type of Action
AMBR	WM INVESTMENTS USA LLC	10 PUKU ST 793 SERENGETI GOLF EST	ATE Add
		KEMPTON 1642 SOUTH AFRI	CA Remove
AMBR	WALTER J JACKSON	10135 HARTFORD MAROON ROA	.D <b>®</b> Add
٠		ORLANDO, FLORIDA 328	27 Remove
			Add
			Remove
<del></del>			Remove 17 JUN 28 POR AT INC. A
		<u> </u>	Kenove
<del></del>	- N/-		□ Adeg
			Remove

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State of Delaware Secretary of State Division of Corporations Delivered 11:37 AM 06/27/2017 FUED 11:37 AM 06/27/2017 SR 20174968873 - Füe Number 5661407

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

THIRD:	MEMBERS OF THE	LLC:	
	WALTER J JACKS 10135 HARTFORD ORLANDO, FLORI	MAROON	•
IN WITN			d have executed this Certificat
	ony of		, 1 (1007