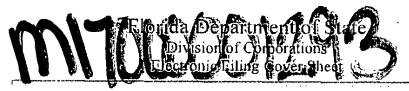
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Pnone

: (323)962-8600 Fax Number : (323)962-3889

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address pleas

Email	Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUN SEPTIC PROTECTION, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help D. SCOTT

MAR 2 1 2017

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI					
	Name of Foreign	Limited Lia	sbility Compa	iny	
Dear S	ir or Madam:				
The en	closed application, certificate and fee(s) a	re submitted	for filing.		
Please	return all correspondence concerning this	matter to th	e following:		
CHEY	ENNE MOSELEY				
	Name of Person				
		₹, ,			
LEGA	LZOOM.COM, INC.		_		
	Firm/Company				
101 N	BRAND BLVD., 11TH FLOOR				
	Address			200	
				聖哥	<u> </u>
GLEN	DALE, CA 91203			555 2	
	City/State and Zip Code				- (
pmos	tyn@americanhomedirect.com			FEST	E 0
E-m	ail address: (to be used for future annual r	eport notific	eation)	CRETARY OF STATE	9
r	de la companya de la			~ ~	
	ther information concerning this matter, p		772 0	800 aut 0704	
	NNE MOSELEY, LEGALZOOM.COM, INC.	at (888 ext. 9724	
	Name of Person	Area Co	ne oz Dayume	e Telephone Number	
	STREET/COURIER ADDRESS:		MATLE	NG ADDRESS:	
	Registration Section	•		ition Section	
	Division of Corporations Clifton Building			of Corporations	
	2661 Executive Center Circle		P.O. Bo	ssee, Florida 32314	
	Tallahassec, Florida 32301		i attanas	acc, Piorida 32314	
Enclos	ed is a check for the following amount:				
	Filing Fee \$\square\$ \$30 Filing Fee &		ling Fee &	S60 Filing Fee,	_
	Certificate of Status	Certif	ied Copy	Certificate of Status	&c.
CR2E05	5 (9/15)			Certified Copy	

11.

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)

Inter new principal office 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)	
2. The Florida document number of this limited li	iability company is: M17000001293
Jurisdiction of its organization: KENTUCK	
Date authorized to do business in Florida: 02	V/14/2017
i. New name of the limited liability company:(mu	ust contain "Limited Liability Company," "L.L.C.," of "LbC.")
If name unavailable, enter alternate name adopte copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	ed for the purpose of transacting business in Florida and attach a lanaging members adopting the alternate name. The alternate name of "LLC.")
 If amending the registered agent and/or registered agent and/or the new registered office. 	ered officer address on our records, enter the name of the new
Name of New Registered Agent:	DM .
New Registered Office Address:	
	Enter Florida Street Address
	City , Florida

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.

.

ndo

Address Address AMBR STEVEN KRANZ 21 SUNNYSIDE LANE WESTPORT, CT 06880 AMBR SCOTT WEISS 159 SORIANO DRIVE JUPITER, FL 33458 MGR KATHY WEISS 159 SORIANO DRIVE JUPITER, FL 33458 MGR KATHY WEISS 159 SORIANO DRIVE JUPITER, FL 33458	Type of Actio
WESTPORT, CT 06880 AMBR SCOTT WEISS 159 SORIANO DRIVE JUPITER, FL 33458 MGR KATHY WEISS 159 SORIANO DRIVE MGR KATHY WEISS 159 SORIANO DRIVE	Remov
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MGR KATHY WEISS 159 SORIANO DRIVE	
100 00 1171	Remov
JUPITER, FL 33458	Add
	Remove
	Add
<u> </u>	Remov
Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in a jurisdiction under the law of which this entity is organized.	THE SECTION
Signature of the authorized representative KATHY WEISS	意記 20 M