

4/16/2020

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TRANSFORM INNOVEL SOLUTIONS LLC**

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

2020 APR 16 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 17 2020

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)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Transform Innovel Solutions LLC

Enter new principal office address, if applicable: 999 Lake Drive

(Principal office address
MUST BE A STREET ADDRESS)

Issaquah, WA 98027

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

P.O. Box 35005

Seattle, WA 98124-3405

2. The Florida document number of this limited liability company is: M19000001567

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 02/13/2019

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Costco-Innovel Solutions LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida Street Address

City, Florida

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.

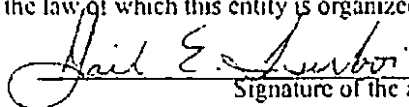
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Transform SR LLC	1170 Kane Concourse, Suite 200	<input type="checkbox"/> Add
		Bay Harbor Islands, FL 33154	<input checked="" type="checkbox"/> Remove
CFO/CEO	Robert A Riecker	3333 Beverly Road	<input type="checkbox"/> Add
		Hoffman Estates, IL 60179	<input checked="" type="checkbox"/> Remove
	Please see attached for additions	Please see attached.	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. 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 the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Gail E. Tsuboi

Typed or printed name of signee

Filing Fee: \$25.00

**Costco-Innovel Solutions LLC (formerly known as Transform Innovel Solutions LLC)
Officer Attachment**

Manager/Officer Title	Manager/Officer Name	Address
President/Treasurer	John Sullivan	999 Lake Drive Issaquah, WA 98027
Vice President/Secretary	Gail E. Tsuboi	999 Lake Drive Issaquah, WA 98027
Assistant Secretary	Margaret McCulla	999 Lake Drive Issaquah, WA 98027
Assistant Secretary	Steve Supkoff	999 Lake Drive Issaquah, WA 98027
Member - 100% Owned	Jedi Holding Corporation	999 Lake Drive Issaquah, WA 98027

2020 APR 16 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "TRANSFORM INNOVEL
SOLUTIONS LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS
NAME TO "COSTCO-INNOVEL SOLUTIONS LLC" ON THE TWENTIETH DAY OF
MARCH, A.D. 2020, AT 1:38 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

7249880 8320
SR# 20202363192

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202653368
Date: 03-25-20

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "COSTCO-INNOVEL SOLUTIONS LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
ASSESSED TO DATE.



Jeffrey W. Bullock, Secretary of State

7249880 8300

SR# 20202393954

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Authentication: 202661971

Date: 03-26-20