P18000004777

(Requestor's Name)
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(Address)
(
(City/State/Zip/Phone #)
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(Business Entity Name)
(Dusiness Littly Walle)
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Special Instructions to Filing Officer:





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COVER LETTER

TO: Amendment Sec Division of Corp			,
NAME OF CODPO	Superuser Softwar RATION:		
	P180000004777 BER:		
	of Amendment and fee are su		
Please return all corre	espondence concerning this ma	tter to the following:	
	Maura McCarthy Bulman, Es	sq.	
	Maura McCarthy Bulman, Pl	Name of Contact Person LC	1
	1779 N. University Drive, Su	Firm/ Company tite 202	
	Address Pembroke Pines, Florida 33024		
	City/ State and Zip Code		
	mbulman@mmbpa.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Maura McCarthy Bulman		954 at (510-2822
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

Superuser Software, Inc.

(<u>Name</u> P18000004777	of Corporation as current	v filed with the Florida Dep	t. of State)	
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes. this	Florida Profit Corporation a	dopts the followir	ng amendment(s)
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Catartered," "professional association,"	Corp." "Inc." or "Co". 7			
B. Enter new principal office address, (Principal office address MUST BE A S				
· 55	·			
				123
C. Enter new mailing address, if appl				
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			
				2
				مور
D. If amending the registered agent ar			me of the	9: 1:0
new registered agent and/or the new	· · · · · · · · · · · · · · · · · · ·	=		0
Name of New Registered Agent	Maura McCarthy Bulman	rsq.		
	1779 N. University Drive,	Suite 202		_
	(Florida etc	eet address)	 	<u> </u>
	Pembroke Pines	cer adarensy	33024	
New Registered Office Address:		(2)	, Florida	
		(Ciṇy)	(Zip)	Code)
N. B. C. L. L. C.				
New Registered Agent's Signature, if c I hereby accept the appointment as regist			is of the position	
, , , , , , , , , , , , , , , , , , , ,		in and accept the whighton	s ty the position.	
Maura M.Car	thy Bulman			
	Signature of New R	egistered Agent, if changing		_
Check if applicable ☐ The amendment(s) is/are being filed p				

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
X I) Change	PTD	Todd Jones	777 Brickell Avenue, #500-9319
Add			Miami, FL 33131
Remove			
2) Change	SD	David Sibiski	777 Brickell Avenue, #500-9319
XAdd			Miami, FL 33131
Remove 3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

	g or adding additional Articles, enter change(s) here: itional sheets, if necessary). (Be specific)	
he number (shares the Corporation is authorized to issue is 10,000.	
		
		
		
		
		
. <u>If an ame</u>	dment provides for an exchange, reclassification, or cancellation of issued shares,	
provision (if no	s for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
		
		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing a epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors with	nout shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast afficient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. It each voting group entitled to vote separately on the	
"The number of votes case	for the amendment(s) was/were sufficient for appro	val
by		
	(voting group)	
September	15, 2020	
Dated		
Signature		
(By a c selecte	irector, president or other officer – if directors or off d, by an incorporator – if in the hands of a receiver, ted fiduciary by that fiduciary) Todd Jones	
	(Typed or printed name of person signing President & Director	g)
	(Title of person signing)	