

STATE OF ALABAMA

**DOMESTIC LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT**

PURPOSE: In order to amend a Limited Liability Company's (LLC) Certificate of Formation under Section 10A-5A-2.02 of the Code of Alabama 1975 this Amendment and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the LLC was initially formed.

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fee to the Office of the Judge of Probate in the county where the LLC's Certificate of Formation was recorded. Contact the Judge of Probate's Office to determine the county filing fees. Make a separate check or money order payable to the **Secretary of State for the state filing fee of \$50.00 for standard processing** (based on date of receipt and volume) or **\$150.00 for expedited processing** (within 24 hours after receipt from the County Probate Office) and the Judge of Probate's Office will transmit the fee along with a certified copy of the Amendment to the Office of the Secretary of State within 10 days after the filing is recorded. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your filing will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored (\$30.00 fee).

(For County Probate Office Use Only)

This form must be typed or laser printed.

1. The name of the Limited Liability Company from the Certificate of Formation:

Space Cadets, LLC

2. The date the Certificate of Formation was filed in the county: 10 / 30 / 2014 (format MM/DD/YYYY)

3. Alabama Entity ID Number (Format: 000-000): 321 - 556

INSTRUCTION TO OBTAIN ID

NUMBER TO COMPLETE FORM: If you do not have this number immediately available, you may obtain it on our website at www.sos.alabama.gov, click Business Services (below picture), click on Business Entity Search, click on Entity Name, enter the name of the entity in the appropriate box, and enter. The six (6) digit number containing a dash to the left of the name is the entity ID number. If you click on that number, you can check the details page to make certain that you have the correct entity – this verification step is strongly recommended.

(For SOS Use Only)

This form was prepared by: (type name and full address)

Chappell Professional Group, PC
137 Business Center Drive
Birmingham, AL 35244



2019030600071440 2/2 \$84.00

Shelby Cnty Judge of Probate, AL

03/06/2019 11:21:37 AM FILED/CERT

DOMESTIC LIMITED LIABILITY COMPANY AMENDMENT

4. The titles, dates, and places of filing of any previous Amendments: Removal of Owner, 5/23/2017, Shelby County

Attach a listing if necessary.

[Instruction on Amendment completion: Be very specific about what must be changed if you are amending existing information. If the amendment includes a name change, a copy of the Name Reservation form issued by the Office of Secretary of State must be attached.]

Registered agents and registered agent addresses are changed by filing a Change Of Registered Agent Or Registered Office By Entity form directly with the Office of the Secretary of State (the new agent's signature is required agreeing to accept responsibility). You may file the information as a Amendment also, but the change form must be on file with the Secretary of State per 10A-1-3.12(a)(2) to effect the change in the public records database.]

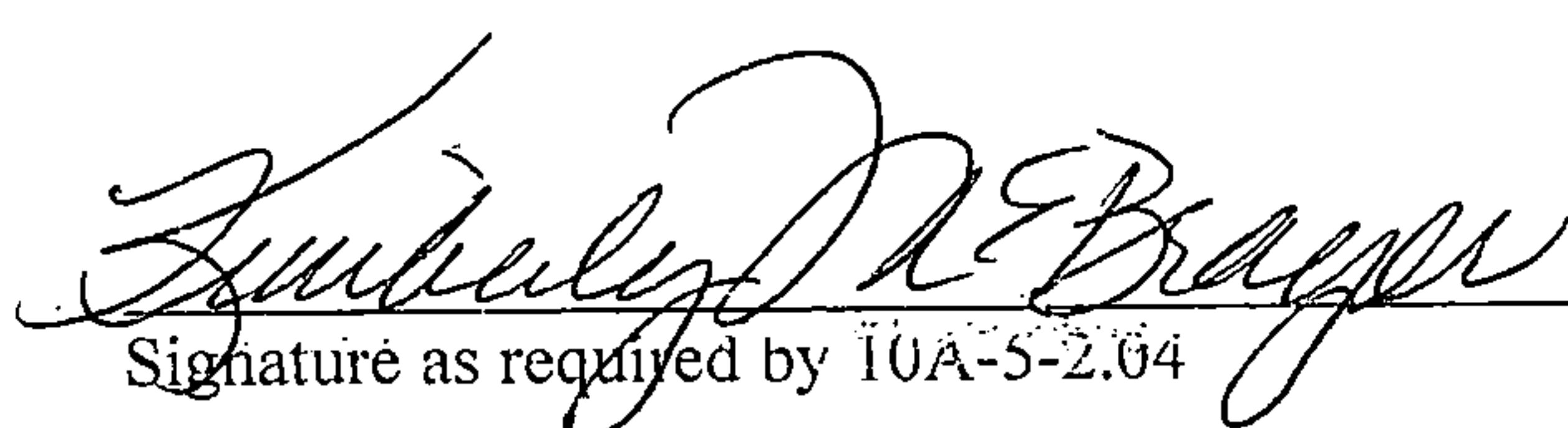
5. The following amendment was adopted on 01 / 01 / 2019 (format MM/DD/YYYY):

Kim McBrayer, sole organizer for Space Cadets LLC, elects to authorize a 25% transfer of interest to William B. Dill, 288 Narrows Reach, Birmingham, AL 35242, effective as of January 1st, 2019.

Additional Amendments and the dates on which they were adopted are attached.

6. The undersigned authorized signature certifies that the amendment or amendments have been approved in the manner required by Title 10A of the *Code of Alabama of 1975* and the governing documents of this entity.

02/26/2019
Date (MM/DD/YYYY)


Signature as required by 10A-5-2.04

Kim McBrayer
Typed Name of Above Signature

Member
Typed Title/Capacity to Sign under 10A-5-2.04