L11000056160

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(Address)
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PICK-UP WAIT MAIL
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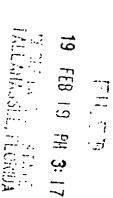




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FEB 2 3 2019 S. YOUNG



COVER LETTER

TO: Registration Se Division of Cor			
	NCIAL, LLC		
Sonace.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and feets) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DAVID A. SIMS, Principa	d and Chief Compliance Officer	
		Name of Person	
	BRS Consulting, Inc.		
		Firm/Company	
	10800 Financial Centre Pa	rkway, Suite 550	
	Little Rock, AR 72211	Address	
	dsims@brsconsulting.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	leation)
For further information c	concerning this matter, please ca	aH:	
David A. Sims		501 442-3585	
Name (of Person	at ()	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRS FINANCIAL, LLC	
(<u>Name of the Limited Liability Company as it</u> (λ Florida Limited Liability	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were performed document numberL11000056160	filed on May 12, 2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	rompany here:
BRS Multi Family Office Advisors, LLC	
The new name must be distinguishable and contain the words "Limited Liability Con	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	FEB 7
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PH 3: 17
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our records, <u>enter the name of the I</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	iy 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being acor removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Change
			
			☐ Remove
			Change
			□ Remove
			Change
			□ Remove
			D Change
			Add
			□ Remove
			☐ Change

ective date, if other than the date of Filing: reflective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Prostant to 6055 to 17 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lister nument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier he 90th day after the record is filed. 2019 Signate of a member or authorized representative of a member David A. Sims			
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David A. Sims		Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00