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(Requestor's	Name)
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PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Dusiness C	nuty Name)
(Document I	Number)
Certified Copies Ce	ertificates of Status
Special Instructions to Filing Off	ficer:
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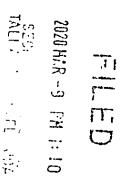
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BIRD FINANCIAL ASSOCIATES, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BIRD FINANCIAL ASSOCIATES, LLC
1711 Cheyenne St.
SARASOTA 7L- 34231 City/State and Zip Code alley 99 to R 555 @ 9 NAIL. Const
For further information concerning this matter, please call:
Larry Allegretto at (941) 735-9460 Name of Person Talendrone Number Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status □ \$60.00 Filing Fee, Certificate of Status & Certificate Opy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bird FINANC	ial Associ	ates, LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000064</u> 22	were filed on $\frac{2}{2}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices 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)		
B. If amending the registered agent and/or registered office a	address on our records, enter the	
agent and/or the new registered office address here:		第二
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	10
	, Florid	a Zin 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AR_	Larry Allegrette	1711 Cheyenne S	<u>†</u> □Add
		SARASOTA, 71 34231	Remove
		TO AMBR'	_ t Change
AMBR	LARRY Allegration	_1711 Cheyenne St	_ ⊠ Ádd
		SARASOHA, 7L	_ □Remove
	,		_ Change
AR	Roger Van Wie	1805 Orchid St.	□Add
		SARASOLA, 71 34239	Remove
		TO "AMBR"	_ LYChange
<u>AMBR</u>	Roger VANWIE	1805 Orchid St	_ Add
		SARASCHA, 71. 3423	Remove
			Change
		 	_ □Add
			□Remove
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fan effective da Note: If the d	e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ective date on the Department of State's records.	
record specified is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	er the
	3-March, 3. 2020.	
Dated	700	
	111/20	
	Maria Hallyselle	
	Signature of a member or authorized representative of a member	