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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Barstow Enterprises 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:
Melissa Barston
Barstow Entrprises LLC
1303 Village Ln.
Ormand Beach FL 32174 City/State and Zip Code info. anaicand reamdaugs a gravil. co E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa Barstow at (80) 878-7517 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status Certified Copy (additional copy is enclosed) S50.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (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

Pars tow Enterorises LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Llability Company)

The Articles of Organization for this Limited Lial Florida document number <u>L20000</u>		10-1-202	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company	here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," th	e designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applical	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		2 28
		MEAN	21 Jan 27 1
Enter new mailing address, if applicable:			. 0
(Mailing address MAY BE A POST OFFICE B	<u> </u>		- 2 5
		<u> </u>	
B. If amending the registered agent and/or regagent and/or the new registered office address		r records, <u>enter the nan</u>	
Name of New Registered Agent:	Meli Ssa	Barst	
New Registered Office Address:	Enter I	Florida street address	
	City	, Florida _	Zip Code
New Registered Agent's Signature, if changing Re	•		zip Code

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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title Name Address **Type of Action** Joseph Barstow 1303 Village Lane DAGE 46R Drond Beach FZ 32174 Decemove _____ □Change AMBR Joseph Barston Same WAdd Remove 16R Melissa Barstow 1303 Village Lane Sadd

Ormand Beach FL. Remove _____ □Remove Remove □ Change _____ 🗆 🗖 Adđ

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f an effective d	ite, if other the date is listed, the c date inserted in	date must be spe	cific and can	not be prior to	date of filing or	r more than 90	(option days after finents, this o	iling.) Pursuar	nt to 605.0207 be listed as
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