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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
VISION OF CORPORATIONS

\$25 Primary Story

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Big Branch Network (Name of Limited Liability Company) |
| (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: |
| Gres Santore (Name of Person) |
| Bis Brand Network CCC (Firm/Company) |
| 533 NW 105-4 Dr. (Address) |
| Coral Spring IC 33071 |
| For further information concerning this matter, please call: |
| (Name of Person) And the Code & Daytime Telephone Number) |
| |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee & S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & S60.00 Filing Fee, Certified Copy (Certified Copy) |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

| ST. | Brand | Wetwork | |
|--|--|--|--------------------------------|
| (Name of the Limited) (A | Liability Company as Florida Limited Liabili | it now appears on our record ity Company) | <u>s.</u>) |
| The Articles of Organization for this Limited Lia | ability Company were | e filed on $\frac{\omega}{19}$ | 00 7 and assigned |
| Florida document number | 64420 | | SECRE 07 DEC |
| This amendment is submitted to amend the follow | wing: | | TARY OF CORPC |
| A. If amending name, enter the new name of | the limited liability | company here: | H 2:51 |
| The new name must be distinguishable and end with "L.L.C." | n the words "Limited L | iability Company," the designat | tion "LLC" or the abbreviation |
| B. If amending the registered agent and/o registered agent and/or the new registered off | | address on our records, <u>e</u> | nter the name of the new |
| Name of New Registered Agent: | (| Tres SAN | fore |
| New Registered Office Address: | | (Enter Florida stre | set address) |

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

| MGRM = Ma | maging Member | | |
|---------------|---|---|--|
| <u>Title</u> | Name | Address | Type of Action |
| MGRAM | Jeremy M. Brooks | Pompano Beach, Fil 3300 | |
| MGRM | Richards brands | 4701 N. Federal Huy #3, Compano Beach, F 3200 | Remove |
| MG-RM | Greg Sandore | 533 NW 105th Dr. (oral Springs, FL) | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| D. If amendin | g any other information, enter change(s | here: (Attach additional sheets, if necessary.) | |
| | Javantar DI 200 | | SECRETARY OF STATE STATE OF ST |
| Dated | | authorized representative of a member | |
| | | printed name of signee Page 2 of 2 | |
| | · | 9 | |

Filing Fee: \$25.00