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COVER LETTER

, Division of Cor	porations		
SUBJECT:		R13e1Shup	LLC
	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
		Ray Gan	112_
	439	Firm/Company . W. Ga. W.	ST
	Tal	10thesse FZ	ST 32301
	E-mail address: (t	City/State and Zip Code O be used for future annual report notion	t
For further information c	oncerning this matter, please ca	ail:	
Run	y Gomez	at (954 85 Area Code Dayting	748775 ac Telephone Number
raine 0	1 43011	,,,,,,,,,	
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

/ Twee BARG	Bershap LLC
(Name of the Limited Liability Company (A Florida Limited Lia	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company w Florida document number <u>L1100126278</u> .	vere filed on 11 07 2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	<u>0</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	26.56
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Vlavida

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.

City

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
M6R	Lus Flando		🗆 Add
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			□Change

	
`an effect. <mark>{ote:</mark> If	date, if other than the date of filing:
record s I is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	1/5/2021
	Signature of a mymber of authorized representative of a piember
	// D. (()