L030000 Z6057

(Requestor's Name)	
(Address)	500356833955
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	12/22/2001013003 **60
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то:	Registration of			s						
SUBJE	CT:	B	&	В	Invest	ments	FLor	ida,	L.L.C	
		•	-	N:	ame of Limite	d Liability Co	mpany			
The enc	losed Article	es of Ar	nendm	ent and feet	(s) are subm	itted for filin	g.			
Please re	eturn ali cor	respond	ence co	oncerning t	his matter to	the followin	ā:			
				T	RIAZ	RAI	MAN			
						Name of	Person			
						Firm/Co	mpany		<u>.</u>	
				(646	Hills	Blvc	-		
					Port	Addro Ora	nge	FL	3212 - · COM	
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For furt	her informat	tion con	cerning	g this matte	r, please call	1:				
	RIAZ	ame of P		4 HM	₹N	at (21, 4	+43	9924 elephone Number	<u>.</u>
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Enclose	d is a check	for the	followi	ing amount	;				/	
□ \$25	.00 Filing F	ee).00 Filing ertificate of		Certitie	Filing Fee & d Copy al copy is encle		Certified	te of Status &

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

B&B Investor	nents 1	FLorida	LLC.
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now app Liability Company	ears on our record /)	<u></u>
The Articles of Organization for this Limited Liability Company Florida document numberL030002605	were filed on	July 1,	2003 _ and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u> ト	1.	<u>here</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," th	e designation "LLC	
Enter new principal offices address, if applicable:		<u>. </u>	2020
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	Α	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/	Α	PH 1:17
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our	r records, <u>enter</u>	the name of the new register
Name of New Registered Agent:	N/A		
New Registered Office Address:	Enter I	lorida street addre	84
		, FI	lorida
	City	 ,	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 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
MGR	RIAZ RAHMAN	Port Orange FL3212	(L'Add
		Port Orange FL3212	7 □Remove
			□ Change
AMBR	M. NADEEM MINHAS	8601 Knottingham Dr	ive _{□Add}
		Kissimmee FL 34741	lī/Remove
		·	□Change
AMBR	RIAZ RAHMAN	646 Hills BlVd:	20 DEC 2
		Port Ovange FL 3217	12 TRemove
		· .	∵ □Change
			□Add
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			□Add
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ective date, if other than the date of filing: 11-01- effective date is listed, the date must be specific and cannot be prior to date te: If the date inserted in this block does not meet the applicable summent's effective date on the Department of State's records.	of filing or more than 90 days after filing.) Pursuant to 605.02
cord specifies a delayed effective date, but not an effective time, at sfiled.	. 12:01 a.m. on the earlier of: (b) The 90th day after th
ed 11-19-2020 Signature of a member of authorized	
No 1010	representative of a member