

Division of Corporations

40500057116

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.
Account Number : I2000000210
Phone : (561)746-1002
Fax Number : (561)775-0270

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: andrew@assetadvisoryservices.com

RECEIVED
2023 JUL 27 PM 3:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BUB UNLIMITED LLC

Certificate of Status	0
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Page Count	03
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2023 JUL 27 PM 4:37

Electronic Filing Menu

Corporate Filing Menu

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2023 JUL 28
T. LEMIEUX

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BUB Unlimited LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/15/2005 and assigned
Florida document number L05000037116.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Andrew J. Francisco

New Registered Office Address:

2141 Alternate A1A, Suite 310

Enter Florida street address

Jupiter

Florida

33477

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.

DocuSigned by:

Andrew Francisco

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: C7740DE4-D206-4C4E-93D0-06F00C29922F

if amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

(((H23000262142 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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[illegible]

Filing Fee: \$25.00